DOCUMENT RESUME

ED 461 407 PS 022 700

TITLE	UNICEF Annual Report, 1994.
INSTITUTION	United Nations Children's Fund, New York, NY.
PUB DATE	1994-00-00
NOTE	115p.; Photographs may not copy adequately. For 1993 Annual Report, see ED 363 426.
PUB TYPE	Reports - Descriptive (141)
EDRS PRICE	EDRS Price MF01 Plus Postage. PC Not Available from EDRS.
DESCRIPTORS	Annual Reports; *Child Health; *Child Welfare; Childrens Rights; *Developing Nations; *Family Programs; Financial Support; Foreign Countries; Human Capital; *International Programs; Nutrition; Sanitation; Technical Assistance
IDENTIFIERS	Maternal and Child Health Services; *UNICEF; United Nations Convention on Rights of the Child; Women in Development Programs

ABSTRACT

This annual report for the United Nations Children's Fund (UNICEF) describes the programs and services provided by this organization in 1993. Following an introduction by UNICEF's executive director, the report reviews regional developments in Sub-Saharan Africa, the Middle East and North Africa, East Asia and the Pacific, South Asia, Latin America and the Caribbean, Central and Eastern Europe, and "emergency countries"--those experiencing war or natural disasters. Specific programs in the following areas are then described: (1) the Convention on the Rights of the Child; (2) child health; (3) nutrition; (4) safe motherhood and family planning; (5) children in especially difficult circumstances; (6) sustainable development and the environment; (7) water and environmental sanitation; (8) urban basic services; (9) education; (10) women in development; (11) management of supplies; and (12) program evaluation. Concluding sections discuss UNICEF's tools for advocacy (publications and communications projects), committees and organizations, and resources (financial, informational, and human). An appendix outlines 1993 Executive Board decisions. (TM)

Reproductions supplied by EDRS are the best that can be made
from the original document.

ED 461 407

1994 UNICEF Annual Report

PS 022700

U.S. DEPARTMENT OF EDUCATION
Office of Educational Research and Improvement
EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

X This document has been reproduced as received from the person or organization originating it.

☐ Minor changes have been made to improve reproduction quality.

• Points of view or opinions stated in this document do not necessarily represent official OERI position or policy.

PERMISSION TO REPRODUCE AND DISSEMINATE THIS MATERIAL IN MICROFICHE, AND IN ELECTRONIC MEDIA FOR ERIC COLLECTION SUBSCRIBERS ONLY, HAS BEEN GRANTED BY

P. Lone

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

2A

unicef
United Nations Children's Fund

BEST COPY AVAILABLE

UNICEF *Executive Board*

1 January to 31 December 1994

OFFICERS FOR 1994:

CHAIRMAN

H.E. Miss Anna Semamba Makinda
(United Republic of Tanzania)

VICE-CHAIRMEN

H.E. Mr. Khalil Makkawi (Lebanon)
Mr. Alexei A. Mojoukhov (Belarus)
Mr. Ronaldo Costa Filho (Brazil)
Mr. Peter Post (Netherlands)

MEMBERS OF THE BOARD:

TERM OF OFFICE EXPIRING ON

31 DECEMBER 1994	31 DECEMBER 1995	31 DECEMBER 1996
Angola	Australia	Brazil
Azerbaijan	Belarus	Burkina Faso
Central African Republic	Canada	France
Colombia	China	Ghana
Congo	Costa Rica	Indonesia
Denmark	Germany	Italy
Ethiopia	Mozambique	Jamaica
India	Philippines	Lebanon
Japan	Russian Federation	Romania
Netherlands	Suriname	United Kingdom
Pakistan	Switzerland	United States of America
Republic of Korea		
Sweden		
United Republic of Tanzania		

According to United Nations General Assembly resolution 48/162 of 14 January 1994 on further measures to restructure and revitalize the United Nations in the economic, social and related fields, the UNICEF Executive Board has been reconstituted to comprise 36 members and the Board year now runs from 1 January through 31 December. The above Board members were elected at the 4 February 1994 organizational session of the Economic and Social Council.

Cover photographs

Upper left: UNICEF/C114-16/Charton
Upper right: UNICEF/Charton
Lower left: UNICEF/Maines
Lower right: UNICEF/Murray-Lee

CONTENTS

INTRODUCTION

By the Executive Director, James P. Grant 2

REGIONAL DEVELOPMENTS 10
SUB-SAHARAN AFRICA 11
MIDDLE EAST AND NORTH AFRICA 14
EAST ASIA AND THE PACIFIC 19
SOUTH ASIA 21
LATIN AMERICA AND THE CARIBBEAN 24
CENTRAL AND EASTERN EUROPE 27

EMERGENCY COUNTRIES 30

CHILD RIGHTS 38
THE CONVENTION ON THE RIGHTS OF THE CHILD 39

PROGRAMMES 42
CHILD HEALTH 43
- Primary health care 43
- The Bamako Initiative 43
- Building on immunization success 44
- Acute respiratory infections 46
- Control of diarrhoeal diseases 47
- AIDS and children 49

NUTRITION 50
- Micronutrients 51
- Breastfeeding 53

SAFE MOTHERHOOD AND FAMILY PLANNING 56
CHILDREN IN ESPECIALLY DIFFICULT CIRCUMSTANCES 59
- Childhood disability 62

SUSTAINABLE DEVELOPMENT – THE ENVIRONMENT 63
WATER AND ENVIRONMENTAL SANITATION 66
URBAN BASIC SERVICES 69
EDUCATION 70
- Education for Development 75

WOMEN IN DEVELOPMENT 76
SUPPLY MANAGEMENT 79
EVALUATION 79

TOOLS FOR ADVOCACY 80
PUBLICATIONS 83
- *The Progress of Nations* 83
- *The State of the World's Children* 84
- *Facts for Life* 85
- New initiatives 86

COMMUNICATION PROJECTS 87
- International Children's Day of Broadcasting 87
- Global Communication Support Fund 87
- Productions and co-productions 88

ADVOCACY IN THE FIELD 89

WORKING TOGETHER 90
NATIONAL COMMITTEES 91
NON-GOVERNMENTAL ORGANIZATIONS 93
INTERGOVERNMENTAL ORGANIZATIONS 94
GOODWILL AMBASSADORS AND CELEBRITIES 95
RELIGIOUS LEADERS 96
PARLIAMENTARIANS 96
MAYORS 97

RESOURCES 98
UNICEF FINANCES 99
- Income 99
- Expenditures 99
- Fund-raising and financial prospects 100
- Debt swaps 100
- 1994 recommendations 101
- Biennial budget 1994–1995 101
- Liquidity provision 103
- Cost-effectiveness 103

GREETING CARD AND RELATED OPERATIONS 103
INFORMATION RESOURCES 104
HUMAN RESOURCES 105

TABLES AND CHARTS

UNICEF emergency expenditure in ten countries, 1991–1993 35
Emergency operations staffing in ten countries 36
UNICEF income by source 1993 99
UNICEF expenditure on programmes by sector 1989/1993 100
UNICEF income 1992–1994 101
UNICEF programmes from general resources 102
Governmental and non-governmental contributions to UNICEF, 1993 106

PROFILES

Kerosene rescues families in more ways than one 17
Land-mines – A war on children 37
Bhutan's gods and goddesses meet Western medicine 41
At risk on the streets 60
Opening doors to Gypsy children 73

ANNEX: 1993 Executive Board Decisions 109
GLOSSARY 113

INTRODUCTION

BY THE EXECUTIVE DIRECTOR
JAMES P. GRANT

UNICEF/Pizzi

BEST COPY AVAILABLE

The world presented a hostile face to many millions of children in 1993. While 13 million died in the clutches of poverty, malnutrition and disease, military commanders and warlords shocked the world community by targeting children and women. Girls were raped by soldiers, young boys were recruited into armies and snipers shot at children in the belief that the most atrocious violations of human rights would terrorize civilian populations into submission. This is an age in which the nature of armed conflicts almost guarantees that many more children than soldiers will die.

As ethnic violence and civil strife escalated in several regions, antagonists sowed anti-personnel mines by the thousands, without thought for the safety of future generations and the day when peace might return. Land-mines have been used for decades to slow the advance of armies, but years after leaders have negotiated their differences, these hidden horrors continue to explode under children's feet. Accidental detonation almost daily of mines and booby traps by refugee families returning to their fields in the western provinces of Cambodia mocked the United Nations supervised elections in that country in May.

It is a shameful irony that human imagination should find such brutal expression in a world with so much capacity to save and to enrich people's lives.

Early in the year, I called for a total ban on the production, stockpiling, sale, export and use of land-mines. The United Nations General Assembly approved four resolutions on land-mines at its 1993 regular session, one of which calls for an export moratorium. It is hoped that all countries will heed this call and take even stronger measures.

Concerned with the protection, as well as the survival and development of children, UNICEF took its defence of children's rights to the World Conference on Human Rights in Vienna in June.

This first major international human rights meeting in 25 years was a milestone for children and women. It endorsed the UNICEF mid-decade goal of universal ratification of the Convention on the Rights of the Child, as well as its founding principle that economic, social and cultural rights are inseparable from civil and political rights. The Conference also embraced the rights of women and the struggle for gender equality which, for UNICEF, begins with the girl child.

The Convention is at the cutting edge of human rights and UNICEF efforts to guarantee child survival and development. Healthy, educated girls and boys, raised in tolerance and respect for the differences and rights of others, are critical to a more peaceful and productive world. Nine tenths of the world's children already live in countries that have ratified the Convention, which looks likely to become the first human rights legal code ever to be adopted by every member of our family of nations. By the end of the year, 154 countries had ratified the Convention, 92 of which had also included its provisions in their national plans of action (NPAs).

The international community's growing acceptance that children's needs are in fact 'rights' has extended UNICEF's leverage to break the chain of sickness, malnutrition and illiteracy at the hub of the poverty cycle.

The possibilities that flow from that ethic are exciting. We have a range of old and new technologies that have saved an estimated 20 million young lives over the past decade and improved the quality of life for an additional 100 million children. Near universal acceptance of the Convention and the proposition that the young should have first call on national resources

WITNESS/Rancinan

UNICEF/93-1122/de Haan

Children accustomed to spending time in real bomb shelters 'play' shelter in a war-ravaged building.

would boost our peaceful revolution for children through the closing years of the decade and into the new millennium.

When 71 presidents and prime ministers and top officials from 88 other countries attended the World Summit for Children at United Nations Headquarters in New York in September of 1990, they made a solemn pledge to reduce child mortality by at least one third, halve the rate of malnutrition and provide primary education for at least 80 per cent of the world's children by the year 2000. They made those promises encouraged by a chronicle of successes that have advanced the well-being of humankind further in the past 50 years than in the previous 2000.

Since World War II, life expectancy in the developing world has increased by about a third, infant and child death rates have been halved, the proportion of children starting school has risen from 50 per cent to 75 per cent, and the number of rural families with access to safe drinking water has risen from just 10 per cent to almost 60 per cent.

In country after country, leaders are beginning to make good on their promises. The universal child immunization (UCI) programme, launched by UNICEF and the World Health Organization (WHO), is vaccinating 80 per cent of the world's children against the six main child killer diseases and saving the lives of 10,000 children a day, more than 3 million a year.

Deaths from measles have been cut by more than half, from 2.5 million a year in 1980 to 1 million. Infant deaths from neonatal tetanus have also been halved and polio is close to being eradicated in several regions. In December, China immunized more than 100 million children against polio in just two days, and in Somalia, despite the highly volatile situation, 750,000 children were vaccinated against measles.

Oral rehydration therapy (ORT) is saving 1 million children a year from diarrhoeal dehydration. In Mexico, where President Carlos Salinas de Gortari has made child health one of the centrepieces of his administration, 600,000 mothers were trained in ORT use and 7 million packages of oral rehydration salts (ORS) were distributed during National Health Week. During the same period, Mexico's Ministry of Health combined measles vaccinations for 22 million children with a megadose of vitamin A and an antiparasitic drug.

Salt iodization programmes against mental retardation are now operational in 24 countries including Bangladesh, China, India and Pakistan, which together have almost half the developing world's children. By 1995, Bangladesh, China, India and Tanzania will be producing enough iodized salt to protect their entire populations. Strong commitments were also made by leaders in Eritrea, Ethiopia, Ghana, the Lao People's Democratic Republic, Malawi, Thailand, Viet Nam and Zimbabwe.

The extraordinary reach of immunization programmes has energized vitamin A distribution. In Bangladesh, Brazil, India, Malawi and the Philippines, children over the age of six months are given vitamin A capsules in tandem with their shots. Vitamin A deficiency can cause blindness and failure of the immune system. Evidence suggests that in many parts of the developing world, vitamin A supplements can reduce child deaths by an average of 25 per cent.

Nutritional anaemia remains the most widespread form of malnutrition, affecting many millions of women and children, but there is promise in an emerging technology fortifying salt with iron as well as iodine. The refinement, testing and implementation of this technology must be vigorously pursued. It could make a major impact on iron

deficiency anaemia at a relatively low cost.

Potent as these interventions are, our capacity to communicate and advocate for change is inhibited by a curtain of illiteracy. Education is in a state of crisis in much of the developing world. Almost 130 million children were denied primary education in 1993 and two thirds were girls. More than 660 million women are illiterate, all the more unfortunate not just because they could be making a real difference in child survival and development, but because they themselves are unlikely to realize their full human potential.

A joint initiative between UNICEF, the United Nations Educational, Scientific and Cultural Organization (UNESCO) and the United Nations Population Fund (UNFPA) to expand basic education opportunities for the majority of the world's out-of-school children was endorsed at an Education for All Summit of nine high-population countries in New Delhi in December.

The Summit was attended by Heads of State and Government who agreed to an urgent review of their education systems and resources. UNESCO and UNICEF also supported a Pan-African Conference on Education for Girls held in the Burkina Faso capital, Ouagadougou, in March-April and attended by 200 participants from 45 African countries.

At least three of the largest developing countries — China, Indonesia and Mexico — are on the way to achieving primary education for at least 80 per cent of their children, and three others — Brazil, Egypt and India — are in a position to do the same with an accelerated effort.

Over the past year and a half, most developing countries have committed themselves to achieving a set of 10 goals for children by the end of 1995 to give a major boost to efforts to reach the year 2000 goals. Their achievement would save an additional 2 million young lives every year and virtually eliminate the major causes of child blindness and mental retardation.

UNICEF/93-0704/Horner

The commitment of many developing countries to a set of goals for the year 2000 could save 2 million children from death and enhance the lives of countless others.

Momentum for reaching the mid-decade goals is increasing, as United Nations Secretary-General Boutros Boutros-Ghali recognized in a statement in September 1993, the third anniversary of the World Summit: "Of all the subjects of development, none has the acceptance, or the power to mobilize, as does the cause of children. Our children are our future."

Also reflecting growing national commitments to child-related goals was the decision of South Africa's President F. W. de Klerk and the President of the African National Congress, Nelson Mandela, to sign the Declaration of the World Summit for Children shortly after they received the Nobel Peace Prize.

The UNICEF-WHO Joint Committee on Health Policy (JCHP) has endorsed the mid-decade goals, and a letter from WHO

UNICEF/3494/Goodsmith

National commitments to the needs of children are growing. Will she have the chance to develop to her full potential?

BEST COPY AVAILABLE

UNICEF/Pirozzi

A moment of relaxation: UNICEF is especially concerned about the seemingly endless demands on women to shoulder responsibilities both inside and outside the home.

Director-General Dr. Hiroshi Nakajima and myself on the mid-decade goals was sent to all Heads of State and Government. The Administrator of the United Nations Development Programme (UNDP), James Gustave Speth, also signed a letter encouraging all Resident Representatives to support the goals for 1995.

Preparations for the International Year of the Family (1994) provided an opportunity to reflect on the shared responsibilities of parenthood and the many pressures our changing and often tortured world has placed on the integrity of family units.

In line with the theme of the Year, UNICEF considers the family 'the smallest democracy at the heart of society', but we know too well how often it falls short of that ideal. Of special concern are the seemingly endless demands on women to shoulder new responsibilities in child-rearing, in home management and economic production, in the workplace and in social and community service. The role of fathers in family life and parenting is too often neglected.

Most UNICEF activities for the year focused on the 'silent' emergencies that claim 35,000 child lives every day. No combination of war or natural disaster has ever produced this diabolically relentless statistic. However, international media attention was mostly drawn to 'loud' emergencies created by natural disasters and by armed conflicts, in Africa and Eastern Europe in particular. Donors continued to find additional resources for emergencies. UNICEF mounted emergency relief efforts in 64 countries compared with 54 in 1992, 50 in 1991 and 26 in 1990.

Emergency programmes absorbed 28 per cent of all UNICEF programme expenditures for the year, compared to 22 per cent in 1992, 19 per cent in 1991 and just 8 per cent in 1988. Despite the tendency to regard emergencies as passing phenomena, the end of the cold war has lifted the lid on ethnic and other rivalries that are unlikely to be resolved in the near future.

The UNICEF reputation for effective delivery in the field has placed the organization in the forefront of global efforts to meet the needs of families caught in emergency situations. We work closely with other United Nations agencies and bilateral groups.

Many of our emergency responses, including immunization, oral rehydration and the restoration of safe water supply and sanitation services, provide a springboard to move quickly from disaster relief to rehabilitation. Emergencies sometimes provide opportunities to empower families with new knowledge and skills necessary for the survival and development of children under normal conditions.

Nevertheless, we have an obligation to respond to situations of increasing complexity that not only strain our resources but also place our staff at grave risk. Three UNICEF staff members were killed in the line of duty in 1993.

UNICEF and its major relief partners, including the United Nations High Commissioner for Refugees (UNHCR) and the World Food Programme (WFP), are also

finding that it has become much more difficult, albeit necessary, to uphold the humanitarian principles of neutrality and impartiality when the United Nations is also politically and militarily involved in an emergency. We must ensure that children who are affected by sanctions remain in the forefront of our concerns.

We must also give urgent thought to the present institutional and legal distinction that is made between refugees who are eligible for international assistance once they cross into neighbouring countries and the families who do not qualify because they are displaced inside their home territory. Of the 42 million people who were driven from their homes by military conflicts during the year, only 18 million were refugees in the eyes of the international community. No child should suffer this wrenching contradiction.

Just as persistent as the world's loud emergencies is the debt crisis which has hobbled the development of the very poorest nations. The total indebtedness of sub-Saharan Africa was projected to be 237 per cent of its export income for 1993.

Debt servicing consumes 30 per cent of the foreign exchange earnings for all of Africa, making it exceedingly difficult for nations to do more for their children even when the political will to do so is strong. Children are paying for these debts with their lives.

The recalcitrance of poverty in the face of such constraints is one reason UNICEF is promoting the 20/20 concept. Our suggestion is that developing countries devote at least 20 per cent of government expenditures to human priorities such as primary health care and family planning, nutrition, basic education, low-cost water supply and sanitation, and that donors provide

UNICEF/91212/Lemoyne

Even in refugee camps, children seek out opportunities to laugh.

UNICEF/Isaac

UNICEF sees families as 'the smallest democracy at the heart of society', but they are coming under increasing pressure in a rapidly changing world.

a commensurate level of official development assistance (ODA) for the same priorities.

We must continue to remind ourselves that these are not paper fantasies. They concern human rights, children's rights that all governments have the obligation to uphold.

We are living in an era of change and opportunity and, like the world around us, the United Nations itself is restructuring to better meet the challenges it faces. It is our fondest hope that the envisaged revitalization of United Nations activities in the economic and social fields will quickly bear fruit. The immediate needs are great and the potential to improve the lives of many millions of children has never been greater. The United Nations structure has already changed in important ways, but changes in structure and process must be translated into effective policies, common goals and strategies for human development that protect and enrich, in particular, the lives of children.

The mandate of UNICEF is clear, but its capacity to respond to children's needs has been constrained by limited resources. We have struggled to do more with less for a long time. We take the donors' concern about cost-effectiveness very seriously. The ratio of administrative and programme support budget expenditure to total net expenditure has declined from 23 per cent in 1986 to 18.7 per cent in 1992-1993.

The emphasis of donors on better resources management and accountability has been timely and is paying off, but industrialized countries must now find new ways to respond with both the moral and the financial support that developing countries so desperately need.

UNICEF presented two major propositions in 1993. The first, elaborated in *The State of the World's Children* (SOWC) report, was for urgent action to contain and reverse the vicious cycle of poverty, high population growth and environmental deterioration — what we call the PPE spiral.

The Earth Summit in 1992 sounded a warning and offered a vision that we cannot ignore if we are to build a sustainable future for our children. Meeting children's basic needs can help break the PPE spiral quickly and at an affordable cost.

President Bill Clinton of the United States launched the 1993 report at the White House in Washington, D.C., on 21 December with a call for renewed action now that the cold war has ended: "We have to chart a new path, channelling the remarkable forces at work in this era with a bold vision of what might be...investing in the children of the world can be the most cost-effective way not only to relieve suffering, but to advance economies, to promote self-sufficiency, to promote democracy and to avert future conflicts."

Our second proposition was contained in a new annual publication, *The Progress of Nations*, which stated that a nation's progress should be measured by the well-being of its people, rather than by the size of its gross national product (GNP), the splen-

The potential to enrich the lives of many millions of children has never been greater.

UNICEF/93-1159/Kerry

UNICEF/5905/Lemoyne

Whether or not children thrive depends on whether their leaders are committed to giving children the best their society has to offer — regardless of its wealth.

dour of its capital city or the might of its military forces. This report drew on the best available data the international community had on the well-being of children and ranked nations according to their performance in such areas as child survival, nutrition, health, education, family planning and progress for women.

There were rude awakenings for some of the wealthier nations that had obviously lost sight of the bottom line — the quality of life for their children.

Why is it that a country like Bhutan, with an average per capita income of US$180 a year, manages to immunize 82 per cent of its children against measles, when countries with incomes ranging from US$13,000 to US$27,000 have coverage rates ranging from just 42 per cent to 77 per cent?

Why is it that a country like Sri Lanka, with annual per capita income of US$500, has one of the world's highest rates of child survival and 91 per cent of its children completing four years of primary school?

And how has Zimbabwe, with an average GNP per capita of only US$620, managed to ensure that 94 per cent of its children reach grade five, thus achieving the same rate as several industrialized countries?

The answers reside within the commitment of these nations to an ideal: A commitment to give the very best they can to their children; a commitment to extract the maximum social miles per gallon from their available resources.

The past year has added momentum towards reaching our 1995 and year 2000 goals, but the coming year will be a 'make-it-or-break-it' year, during which all developing countries, all donors, all non-governmental organizations (NGOs) and international agencies must unite to ensure the achievement of our targets.

If we can demonstrate success by the time of the World Summit for Social Development in Copenhagen in March 1995, we will have made a major contribution to sustainable human development at this most crucial juncture in history.

James P. Grant
Executive Director

REGIONAL DEVELOPMENTS

UNICEF/0-0617/Isaac

SUB-SAHARAN AFRICA

ALTHOUGH some countries of sub-Saharan Africa fared better than others in 1993, the fragile outlook for most of the region's children can be found in a few disturbing statistics.

Women in sub-Saharan Africa have an average of 6.5 children in their lifetime, but the survival prospects of mother and offspring are the lowest of any region in the world. Mothers have a 1-in-20 chance of dying in childbirth. And for every 1,000 live births, 183 children die before their fifth birthday. Of the surviving children, 31 per cent are malnourished. Only 48 per cent reach the fifth grade of primary school.

While some of these statistics represent a significant improvement on conditions affecting African children at the time of independence 30 years ago, they also highlight the region's struggle to weather severe or prolonged emergencies without great suffering and loss of life. Elevating that toll each year is an average population growth rate of 3 per cent that exceeds the region's current agricultural and economic growth, and therefore its capacity to meet basic needs. With a population of nearly 550 million, sub-Saharan Africa has 14 of the world's 20 fastest-growing populations, all with the potential to more than double, or even triple, in size by the year 2025.

Civil and political turmoil in the midst of deep-seated poverty has obliged most sub-Saharan nations to complement their development planning with disaster-preparedness. Eighteen of the 23 countries covered by the UNICEF West and Central Africa Regional Office (WCARO) in 1993 were affected by some form of political instability, social tension or ethnic violence that could, and in some cases did, reach emergency pitch overnight.

The political and economic fortunes of several countries covered by the Eastern and Southern Africa Regional Office (ESARO) appeared to be improving, but peace accords in 1992 and 1993 also raised concern for hundreds of thousands of refugees who were free to return home. Most families had fled with little more than the clothes on their backs and were in desperate need of help to re-establish themselves.

An inevitable consequence of the various crises besetting the region has been a dramatic rise in the number of children in especially difficult circumstances. The casualties include: children and child soldiers who have been physically and emotionally disabled by the traumatic experiences of war; refugee children, many of whom have lost or become separated from their families; and the growing urban phenomenon of street children. Adding to the region's social burden is the further complication of AIDS, which is overwhelming medical facilities, robbing nations of people in their most productive years and overtaxing the capacity of traditional family support systems to care for tens of thousands of children orphaned by this disease.

On a more positive note, virtually all African countries (except conflict-affected Angola, the new nation of Eritrea, Gabon, Somalia, South Africa and Zaire) have drafted or finalized NPAs. Increasingly, these plans have been backed by a shift in public expenditure towards human development, including basic services and poverty alleviation. UNICEF continued to promote these trends in 1993 and to advocate with donors for a similar reassessment of priorities, as well as for increased resource flows and debt reductions. Also noteworthy is the fact that 41 countries in the region have ratified the Convention on the Rights of the Child, which is further articulated in the African Charter on the Rights and Welfare of the Child, signed by the Organization of African Unity (OAU) member States.

At the OAU International Conference on

Ensuring good health from the start: Children should be weighed and measured every month, from birth to the age of three years. Poor growth can pass unnoticed unless children's progress is checked against a chart that shows how tall or heavy they should be for their age.

UNICEF/93-0636/Press

Hope lies in education: Going to school gives structure to the lives of children in emergency situations and conveys a message of hope for the future to the whole community.

Assistance to African Children (ICAAC), held in Dakar in November 1992, governments identified a series of mid-decade targets for children that were very similar to those later endorsed by the UNICEF/WHO JCHP.

The prospects for meeting those goals are good. A majority of nations consider the expanded programme on immunization (EPI) goals to be attainable, although some countries in a state of emergency, or those without easily accessible health facilities, would face major challenges in achieving child immunization targets. Awareness of ORT has increased dramatically in recent years but the gap between knowledge and practice is still wide. The potential to achieve universal salt iodization is high, and the virtual elimination of vitamin A deficiency might also be attainable. Countries where guinea worm disease (dracunculiasis) is endemic are endeavouring to eliminate the disease by 1995.

BFHI, the initiative in support of breastfeeding, is being vigorously pursued, and a number of countries including Cape Verde and Côte d'Ivoire aim to have their hospital and maternity facilities baby-friendly by the end of 1995. The likelihood of attaining BFHI goals is considered to be good even in countries affected by emergencies.

◆ WEST AND CENTRAL AFRICA: With the exception of Gabon, all the countries assisted by UNICEF in the region are least developed countries. Chad, Liberia, Sierra Leone, Togo and Zaire were all in critical states of emergency during the year, although other countries suffered severe social and economic hardship as well. A variety of indicators, including a rise in the number of single-parent households, an increasing number of households dependent on the informal sector for income, growing numbers of street children, and reduced family income and purchasing power for basic health and education services, suggest that the quality of life for many people in the region is precarious. All 23 countries of West and Central Africa continued to operate under structural adjustment programmes, some of which were already 10 years old.

Most countries in 1993 considered the mid-decade goals for immunization to be achievable, but there has been considerable slippage in the UCI coverage rates of some countries since 1991. Mortality rates for infants, children under five and mothers remained the highest in the world. Measles and neonatal tetanus have been replaced by malaria, acute respiratory infections (ARI) and diarrhoea as the main cause of under-five mortality in most West and Central African countries. Yet the death toll from measles and neonatal tetanus remains very high, especially in emergency situations where EPI activities are interrupted. Malaria case management has been hampered by drug resistance, and AIDS is claiming an increasing toll. Obstetric complications remained the main cause of maternal mortality.

Although the macroeconomic and political situations in the region presented an especially challenging environment for achieving mid-decade goals for children, there was hope in 1993 that substantial additional resources might still be mobilized.

The World Bank showed increasing commitment to poverty alleviation programmes and the African Development Bank decided to allocate 25 per cent of its lending portfolio to social programmes. Also promising was the fact that a number of countries, through the NPA process, have acknowledged a need to reduce their military expenditures and realign their budgets in favour of social spending.

◆ EAST AND SOUTHERN AFRICA: After a difficult year, including one of southern Africa's worst droughts this century, there were broad signs of recovery in 1993. A strong agricultural performance in southern Africa, improved security conditions in Mozambique and much of Somalia, and greater political stability in Ethiopia and Madagascar were among the positive factors for the year.

Short-term factors that also stimulated economic recovery included low oil import prices and a modest improvement in coffee export

prices, which were of particular help to Tanzania and Uganda. Kenya, however, severely affected by ethnic violence, recorded its lowest economic growth for many years, and recovery in South Africa was constrained by uncertainty over transitional arrangements leading to the country's first non-racial elections.

Several countries, including Malawi and Tanzania, continued to make progress towards multiparty systems. Lesotho and Madagascar held general elections that were followed by peaceful transfers of power, and multiparty local government elections were held in Namibia and Zambia.

A peace agreement was signed in Rwanda between government and rebel forces, and the peace accord between the Government and Renamo in Mozambique in 1992 allowed hundreds of thousands of refugees to return to their homes. UNICEF, in collaboration with other agencies, provided large-scale support for the resettlement of displaced people in Mozambique and Rwanda. Eritrea gained independence, and Ethiopia undertook a large-scale military demobilization.

Developments elsewhere, however, caused widespread dislocation and loss of life. The direct and indirect casualties of the fighting that engulfed Angola in 1993 are certain to amount to hundreds of thousands of children and adults killed by warfare, disease and malnutrition. A military coup in Burundi in October interrupted a brief period of democratic rule following mid-year elections, causing over 1 million civilians to flee into neighbouring Rwanda, Tanzania and Zaire. In 1993, instability in southern Sudan forced tens of thousands of newly displaced people to take refuge in Uganda, Ethiopia and Kenya.

According to the UNDP Human Development Index, the region performed poorly overall, but towards the end of the year almost all countries had produced final or substantive draft NPAs indicating their commitment to national goals for children and human development priorities. A number of governments were involved in significant restructuring of their budgets to give higher priority to social spending, and in Ethiopia, Namibia, South Africa, Uganda and other countries this had been combined with a reduction of spending on defence and security.

Achievement of the mid-decade goals for children appeared feasible for most countries in the region, but prospects for reaching the World Summit goals for the year 2000 were less favourable.

Recent data indicated that after years of improvement, infant and maternal mortality rates were beginning to rise with the spread of HIV/AIDS, malaria and other diseases related to weakened public health systems.

Almost every African nation commemorated the third annual Day of the African Child (16 June), which provided an opportunity for the world to focus on the continent's achievements as well as its needs *(see box on following page)*.

UNICEF/93-1102/Pirozzi

Conflict has added to the strains on basic services in the cities of sub-Saharan Africa, already stretched by the influx of rural migrants.

The Day of the African Child

The Day of the African Child (16 June) gave African countries an excellent opportunity to highlight developments on children's issues, including NPAs, progress towards the World Summit goals, and ratification and implementation of the Convention on the Rights of the Child. Heads of State, prime ministers, First Ladies, foreign ministers, religious leaders, artists and intellectuals, educators, the media and thousands of children were involved in advocacy events for the Day.

Major support activities were organized by National Committees in Australia, Colombia, Italy, Japan, Sweden, Switzerland, the United Kingdom and the United States. A week-long commemoration at the United Nations Headquarters and elsewhere in New York City was held under the joint chairmanship of Mrs. Leia Boutros-Ghali (wife of the United Nations Secretary-General), Mrs. Matilda Cuomo (wife of the New York State Governor) and Mrs. Joyce Dinkins (wife of the then Mayor of New York City). These events included a lecture by Governor Mario Cuomo, an inter-faith religious service, an educational/cultural event for 700 schoolchildren and screenings of films by African directors.

The week was capped by a United Nations reception, sponsored by Chemical Bank, featuring performances by Harry Belafonte, Youssou N'Dour and Dance Africa.

Bryant Gumbel, host of the NBC *Today* show, was presented with the Africa Future Award of the United States Committee for UNICEF.

MIDDLE EAST AND NORTH AFRICA

UNCERTAINTY dogged the Middle East and North Africa (MENA) region in 1993, but there were also reasons for hope, the strongest being the prospect of peace between Israel and the Palestine Liberation Organization. The signing of a peace accord in September gave the entire region an opportunity to reassess defence and security budgets with the hope of refocusing national agendas on human development goals and the needs of the next generation. Other achievements during the year included multiparty elections in Jordan and the acceleration of postwar reconstruction in Lebanon.

Elsewhere in the region, optimism was less evident. Civil and political unrest continued in Algeria, Djibouti, the Sudan, Yemen and, to a lesser extent, Egypt. International sanctions were maintained against Iraq and Libya, and the condition of children and women in Iraq worsened. In the Gulf States and Saudi Arabia, the lingering economic burdens of the 1991 Gulf War were compounded by a slump in oil prices. UNICEF maintained its support for major emergency operations in Iraq and the Sudan and provided emergency assistance to flood victims in Yemen.

There were positive signs throughout the region, however, that countries intended to follow through on their commitments to children and the mid-decade goals in particular. Most countries completed their NPAs, and a regional fund-raising strategy was developed to mobilize the necessary financial support. Mid-decade goal work plans were nearly finished, and a trimester monitoring system for the region was expected to be in place in early 1994. The main objectives are to minimize regional disparities in development opportunities for children, especially for the girl child and for the most disadvantaged groups, including the growing number of urban poor, and to mobilize technical and financial support for poorer countries.

The League of Arab States reiterated its commitment to support goals endorsed in the Pan-Arab Plan for Child Survival, Protection and Development, and leading medical educators from 12 countries discussed ways of focusing medical education on grass-roots approaches to community health care and the World Summit goals for children.

A majority of countries in the MENA region achieved the UCI/1990 target of 80 per cent immunization coverage, and many have since surpassed that target. However, immunization coverage in a few countries, including Algeria, the Sudan, Turkey and Yemen, has slipped due to such factors as the rising cost of vaccines, cold-chain maintenance and civil unrest, which made some areas inaccessible to vaccination teams and diverted funds from child survival activities. Priority in 1993 was given to targeting high-risk

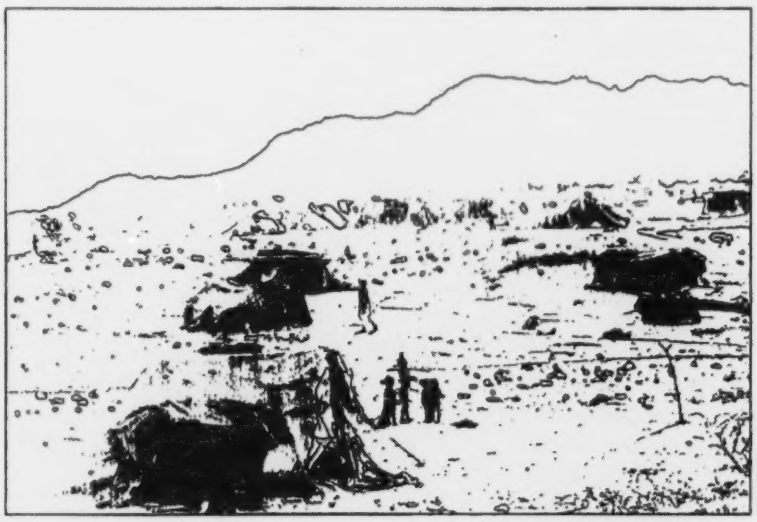
areas for mass immunization and stronger surveillance, particularly for measles and neonatal tetanus.

Efforts continued towards making the Gulf States and the Maghreb polio free. Bahrain, Kuwait, Oman, Qatar, Saudi Arabia and the United Arab Emirates have already achieved high rates of coverage accompanied by strict surveillance and case investigation procedures, and it is possible that the Arabian peninsula will be polio free by 1995, when Yemen is expected to have eradicated the disease. In the Maghreb, Algeria, Libya, Morocco and Tunisia reported no new cases of polio in 1993, but surveillance systems there are weak and will be strengthened in 1994.

The first of two consultations on programme evaluations at the regional office in Amman was held in October 1992 and attended by obstetricians, gynaecologists, epidemiologists and university professors, who reviewed evaluations of UNICEF programmes and discussed ways of making them more responsive to women's needs. The second meeting, in June 1993, took up UNICEF evaluation and monitoring in the control of diarrhoeal diseases (CDD) and related activities, including breastfeeding and communication strategies.

Acute respiratory infections continue to be among the leading killers of children under five years of age in the MENA region and are a major cause of illness and deaths in other age groups as well. Ten countries (Djibouti, Egypt, Iran, Iraq, Jordan, Morocco, Oman, the Sudan, Syria and Tunisia) now have operational programmes to combat ARI.

The control of iodine deficiency disorders (IDD) is a major priority in the MENA region for all but the handful of countries that have goitre rates below 5 per cent (Djibouti, Tunisia and the Gulf States). All other States in the region have taken steps to control IDD through salt iodization



UNICEF/Lassonne

Helping to rebuild peace: UNICEF assists in providing medical supplies and food to camps for displaced people.

Displaced from her home, a young girl washes dishes in front of a makeshift house.

Monitoring babies' growth is the first step in preventing malnutrition.

UNICEF/7356/Goodsmith

or have plans to do so. IDD surveys were carried out during the year in Algeria, Egypt, Jordan, Lebanon, Oman and Yemen.

Relatively little is known about the prevalence of vitamin A deficiency in the region, although all countries have adopted the mid-decade goal of eliminating the problem by 1995 by encouraging more diversity in diets, the distribution of vitamin A capsules in high-risk areas, and the introduction of vitamin A in the management of measles. Surveys to close the knowledge gap about vitamin A deficiency are planned for 1994.

As a result of the baby-friendly hospital initiative (BFHI), 16 of the MENA region's 21 countries have passed legislation banning the distribution of free or low-cost breastmilk substitutes. Medical school curricula began emphasizing the importance of exclusive breastfeeding for the first four to six months of life. Legislation obliging employers to provide adequate maternal leave has been enacted in Egypt, Iran, Iraq, Tunisia and Turkey. The number of baby-friendly hospitals in the region grew from 58 to 102 during the year. Many other hospitals, already practising the UNICEF/WHO-recommended steps to successful breastfeeding, awaited official recognition. Most countries in the Gulf now have at least one baby-friendly hospital, and all six hospitals in Bahrain have been declared baby-friendly. Special efforts will be needed, however, to counter aggressive marketing of breastmilk substitutes in the region. The percentage of women in these countries who breastfeed their infants exclusively for the first two to three months ranges from 18 per cent to 42 per cent.

The MENA regional office produced and distributed information kits to UNICEF offices and partners throughout the region on such subjects as breastfeeding, Education for All, and children and the environment. UNICEF and NGOs from the region discussed a proposal for a regional movement to promote implementation of the Convention on the Rights of the Child.

The installation of a data enhancement and display system in government, NGO and UNICEF offices throughout the region helped improve monitoring of national and regional initiatives for children. The system, developed by the regional office and since adopted by UNICEF for worldwide application, is a tool for monitoring World Summit goals through their related indicators. It also has mapping and graphics capabilities.

During the year, the regional office also helped set up the ChildNet electronic network, which enables UNICEF partners everywhere to share ideas and experiences through telephone lines and personal computers.

Although MENA countries have made considerable progress in education for children, 45 million women and girls — at least half the region's female population 15 years and over — are illiterate. The regional office prepared a guide for improving girls' education through formal and informal learning channels. The guide, to be published in 1994, has a directory of leading educators and technical resources in the region and is intended for regional policy makers, planners and education programme managers.

During the year, UNICEF also supported an initiative to make better use of radio and television for the advocacy of child rights and development. UNICEF is encouraging the production of quality programmes for and about children as well as documentaries and information spots to promote tolerance among children. Work started on a video-based parent education system to provide information on enhancing child development.

A regional programme was also initiated during the year to counter the traumatic impact of war on children. In the last decade, an estimated 40 million of the region's children have been exposed to armed conflict, but very few of the region's psychologists, psychiatrists and child development specialists have training or experience in trauma psychology. The programme will provide training opportunities and culturally appropriate resource materials that can be tailored to the needs of individual countries and communities.

BERHUSTAR, NORTHERN IRAQ

Kerosene rescues families in more ways than one

It is midday at the village school at Berhustar in the Governorate of Erbil, but the children are dressed as if they had just arrived. Bundled up in layers of clothing, their breath white in the winter air, they watch as their teacher paces the room wrapped in an overcoat and scarf. The school has no money for heaters, and fuel is scarce. But as the children huddle in their cold brick classroom, there is hope that better times are ahead. They have heard that they will be let out from school early to watch the arrival of a tanker bringing kerosene fuel for the village and heaters for their chilly classrooms.

"For once the teachers are happy to see me," says Jamal Zitu, Superintendent of Schools, as he arrives with the truck. "With heaters and kerosene we will be able to keep the school open through the winter."

Mr. Zitu oversees kerosene deliveries in the Governorate of Erbil. He visited 502 primary schools and kindergartens in one three-week period with tankers contracted by UNICEF to replenish long-depleted supplies.

After the Persian Gulf war in 1991, UNICEF was designated, under the United Nations relief plan for Iraq, to be the lead international agency for humanitarian assistance to the three Governorates of Erbil, Dohuk and Suleimaniyah and is responsible for the supply and distribution of 68 million litres of kerosene.

The winter of 1992–1993 had become a life-and-death struggle for families in towns and villages throughout northern Iraq as temperatures fell below freezing. Forests that once provided fuelwood for rural populations had been severely depleted by wars and by cutting for home use. Forest reserves in Suleimaniyah were reduced to one fifth of their 1977 level. Then the denuded terrain had been mined, making any attempt to salvage the remaining fuelwood extremely hazardous.

17

Children and women were at special risk because gathering fuel was mainly their responsibility. One hospital alone in Suleimaniyah treated 164 land-mine injuries in 1993 (*see also the profile, Land-mines — A war on children*).

UNICEF/Scott

The objective of the winter kerosene programme in northern Iraq was to provide 200 litres of fuel for each family to alleviate hardship through the coldest months, ease the pressure on the region's remaining tree cover and spare civilian populations the risk of gathering fuel in mined areas. Urban populations were given priority because, in the absence of kerosene, fuelwood prices had soared beyond the means of most households, leaving families in the towns and cities with no heat.

UNICEF provided 23.7 million litres of kerosene, the European Union 25 million litres, and the US Office of Disaster Assistance 19.3 million litres. CARE Australia was contracted to provide all the logistical support for the project.

Between November 1992 and April 1993, the supply operation handled deliveries by more than 2,855 trucks to 550,000 families in the three governorates as well as to schools and health centres — a feat that was complicated by a range of security concerns including sabotage of the trucks and theft. United Nations guards travelled with the convoys and examined each truck for explosive devices after several food supply vehicles were destroyed by saboteurs.

As family members arrived at distribution points, rolling their battered and empty 220-litre fuel drums, supervisors like Mr. Zitu carefully monitored the process, dipping a wooden measuring stick into each tank to ensure that families got their fair share. At the peak of the programme, UNICEF and CARE were delivering and distributing about 450,000 litres of kerosene a day.

For families throughout northern Iraq, the kerosene distribution programme had the added benefit of stabilizing market prices for fuel. Before the United Nations intervened, a litre of kerosene cost 12 dinars, but the price fell quickly to 3 dinars when UNICEF supplies became available.

The programme placed a small levy on fuel delivered to families that could afford to pay and deposited the proceeds in a special Children's Fund to support social programmes chosen by a committee in each governorate. Each committee had 10 members including a UNICEF representative. By the end of the winter, the Fund had generated more than 20 million dinars (US$300,000), and the committees met to decide how best to spend it.

The committee in Dohuk announced plans to establish a printing factory to produce school textbooks and teaching manuals, giving employment to some 300-400 orphans and disabled persons. Without resources to replace books that were once supplied from Baghdad, school supplies were in poor shape and hard to find.

UNICEF was asked to help by photocopying teaching materials, but this was not a cost-effective approach. The factory is expected to support itself with sales of culturally relevant materials in Kurdish to education departments and other customers.

In Erbil, the funds were to used to improve facilities at a centre for mentally and physically disabled children, to provide desks and sanitation services at schools, to support centres for antenatal care and immunization in the three main cities, and to provide PHC training for birth attendants and doctors.

Local administrations in each governorate assumed responsibility for secondary deliveries from bulk delivery stations in 1993-1994, and a coupon system was introduced as a means of monitoring distribution. UNICEF and the governorates printed sheets of coupons, each carrying a different health message. The system worked efficiently and also provided an opportunity to educate a large family audience.

The levy for users was also raised slightly, although UNICEF insisted that any family that could not pay would still receive its 200-litre allocation. The levy raised 15 million dinars (US$225,000) for the governorates' Children's Fund after meeting secondary transportation expenses and the cost of local personnel who handled the distribution of coupons and the collection of fees.

Between October and December, 111.6 million litres of kerosene were delivered to 558,000 families, and it was expected that a total of 153.8 million litres would be distributed by the end of March 1994.

Fuel distribution for 1993-1994 was also adjusted to provide a 50,000-litre reserve in each governorate for destitute returnee families who had fled conflicts in the area, and to allocate 80 litres of fuel for any civil servants found to be experiencing hardship because of their low fixed income.

It has also been proposed that any similar winter kerosene programme in 1994-1995 consider supporting small income-generating projects through the Children's Fund as a means of sustaining its projects for children when fuel support is no longer programmed through the United Nations humanitarian assistance plan.

As part of its winter emergency programme, UNICEF also supported the installation or repair of water supply systems in more than 160 communities in northern Iraq, ranging from villages with a few hundred inhabitants to large towns.

By the end of March, more than 3 million people had benefited from these projects which are expected to have a significant impact on CDD and considerably improve hygiene in general.

Water supply efforts were accompanied by sanitation projects and an emergency health programme, including immunization, the distribution of iron supplements to combat anaemia in pregnant women and ORS for diarrhoeal dehydration.

UNICEF also helped schools like those in Berhustar by providing basic teaching supplies, including blackboards and chalk, copybooks, pens, pencils, rulers and erasers.

The sale of kerosene at a reasonable price in northern Iraq provided communities with more than just heat in the coldest months: Children once again could attend schools that were equipped, and social services were improved for everyone.

EAST ASIA AND THE PACIFIC

ACCELERATING economic growth lifted many of the more than half a billion children living in East Asia and the Pacific* out of poverty, but a significant number still live amid both familiar and new forms of deprivation.

Six countries — China, the Democratic People's Republic of Korea, Malaysia, the Republic of Korea, Singapore and Thailand — comprise the large majority of the region's total population. The under-five mortality rate for the group is below the regional average, 57 deaths per 1,000 births.

Six other countries of the region — Cambodia, the Lao People's Democratic Republic, Indonesia, Mongolia, Myanmar and Papua New Guinea — have under-five mortality rates up to three times higher than the regional norm. The disparity between groups of countries, and between rural and urban populations within them, is an indication of the challenge and potential of the region as a whole.

A major mid-decade goal of governments and voluntary organizations working with UNICEF is to sustain and improve the region's high overall immunization coverage, while combating the prevalence of diarrhoeal diseases, respiratory infections and measles, which are leading causes of child deaths in most countries.

Improved economic growth has lifted many of the region's children out of poverty.

UNICEF/HQ88/Lynch

UNICEF programmes provide supplies and training for immunization, nutrition, ORT and birth care in countries such as Cambodia, the Lao People's Democratic Republic, Mongolia and Myanmar. The rehydration training programme in Mongolia, begun after a WHO study of ORT practices, found that although most mothers and caregivers were providing therapy, they were preparing the oral rehydration solution improperly. Since 1990, UNICEF has trained over 1,500 physicians and health workers in correct procedures.

Malaria accounts for most deaths in all age groups, including children, in Viet Nam, which is receiving UNICEF programme assistance to reduce its incidence. Currently, however, UNICEF is able to cover less than 5 per cent of the country's 400 districts affected by malaria. Malaria is also a significant problem in the Lao People's Democratic Republic, where a UNICEF pilot project aims to control the disease.

Several countries have performed well in health, nutrition and education. The Republic of Korea, Singapore and Thailand, in fact, are newly industrializing countries that maintain high rates of literacy and school enrolment.

The mid-decade goals received unprecedented support from the 17 countries that held ministerial consultations in Manila in September. The Manila Consensus included pledges to support the concept of devoting 20 per cent of government spending in the developing world and 20 per cent of overseas aid budgets to meeting basic human needs. Regional priorities include working towards full ratification of the Convention, universal child immunization and iodization of salt, and expanded baby-friendly hospital coverage.

Support for education goals also advanced. In response to an initiative of UNESCO and UNICEF, the Government of China last year hosted international delegations from the most populous countries of the world at its National Conference on Education for All, presided over by Premier Li Peng. The Conference reaffirmed China's commitment to education in its social and economic development plans for the 1990s, and to promoting education in those countries. Officials from Bangladesh, Brazil, India, Nigeria and Pakistan

BEST COPY AVAILABLE

A refugee girl returns from exile.

UNICEF/5878/Lemoyne

attended, along with the Vice-Governors of China's provinces and education officials. China also sponsored many programmes last year to mobilize the country to achieve mid-decade goals in health, immunization and nutrition.

UNICEF has resolved to augment education on mother and child care in response to a decline in breastfeeding practices in some countries in the region. Meanwhile, bans on the public advertising of breastmilk substitutes and the use of infant formula products in hospitals and maternity facilities are being pursued through BFHI. China, Malaysia and the Republic of Korea expect to put an end to infant formula distribution through hospitals by the end of 1995, and Indonesia's Ministry of Health is trying to make all hospitals and health institutions baby-friendly.

The safe motherhood initiative is helping countries with high maternal mortality rates, such as Cambodia, Indonesia, the Lao People's Democratic Republic, Mongolia, Myanmar and Papua New Guinea. UNICEF concepts of family health and birth spacing are gaining support in Cambodia, the Lao People's Democratic Republic, Mongolia and Myanmar. The regional trend is to integrate family planning with maternal and child health (MCH) services, as is done in China, Indonesia, Myanmar, Thailand and Viet Nam.

Rapid urbanization and industrialization in the region's newly developing countries have often amplified social problems, including the exploitation of child labour; child neglect and abuse, including child prostitution; homelessness and the problem of street children; and drug addiction. These problems are compounded by continuing disparity in opportunities for girls in many countries and the growing risk of HIV infection and AIDS.

AIDS is a major threat to women and children and is rapidly spreading among intravenous drug users and prostitutes, especially in Myanmar and Thailand. In these countries, UNICEF has participated in developing preventive educational programmes for children. Studies conducted at the prompting of UNICEF have identified small but growing numbers of AIDS cases in the Republic of Korea. Other studies have uncovered child abuse and neglect victims.

As part of maternal and child health services in the region, midwives witness a demonstration of hand washing techniques.

UNICEF/5701/Mamichi/Asahe

In Malaysia, a country with high levels of immunization, literacy and school enrolment, UNICEF has urged that the more than 400,000 illegal immigrant workers and their families be included in health, education and nutrition monitoring. The organization also supports training for immigrant mothers and birth assistants.

This year, five new countries (the Federated States of Micronesia, Fiji, the Marshall Islands, Papua New Guinea and Vanuatu), among the 29 covered by the UNICEF East Asia and Pacific Regional Office (EAPRO), ratified the Convention on the Rights of the Child. From the Great Hural of Mongolia to the legislatures of China, the Republic of Korea and Viet Nam, countries have been reviewing and incorporating Convention principles into their national health, education and welfare laws. However, Brunei Darussalam, Malaysia, Singapore and nine Pacific island countries have yet to ratify the Convention. In five of the Pacific island countries — some of which are not fully independent — UNICEF has organized legal support to facilitate the difficult ratification process.

As a result of its growing economy, the Republic of Korea last year officially converted from an international aid recipient to an international donor nation in preparing to join the Organisation for Economic Co-operation and Development (OECD). This has defined a new role for UNICEF. The field office in Seoul has been transformed into the Korean Committee for UNICEF, an advocacy organization for children in need in the developing sector. Former Prime Minister Hyun Soong-Jong has assumed the presidency of the Committee.

* East Asia: Brunei Darussalam, Cambodia, China, Democratic People's Republic of Korea, Hong Kong, Indonesia, Lao People's Democratic Republic, Malaysia, Mongolia, Myanmar, Papua New Guinea, Philippines, Republic of Korea, Singapore, Thailand, Viet Nam; Pacific island countries: Cook Islands, Federated States of Micronesia, Fiji, Kiribati, Marshall Islands, Niue, Palau, Samoa, Solomon Islands, Tokelau, Tonga, Tuvalu, Vanuatu.

SOUTH ASIA

UNICEF consolidated its programmes in South Asia in 1993, concentrating on achievable goals in the eight countries of the region — Afghanistan, Bangladesh, Bhutan, India, Maldives, Nepal, Pakistan and Sri Lanka.

Nearly one quarter of the world's children live in the region, many of them in acute poverty. Most of the 38 million children born last year in South Asia face deprivation second in severity only to that of sub-Saharan Africa. More than 50 per cent of adults are illiterate, and school enrolment and completion rates are low for children. South Asians generally suffer from poor nutrition and high rates of maternal and under-five mortality. India, the most populous country in the region, accounts for some two thirds of infant deaths.

Last year, fighting in Afghanistan and northern Sri Lanka and severe floods in Nepal forced millions to become refugees. Those emergencies became the focus of UNICEF programmes.

Overall conditions in many countries of the region, however, improved last year. The Government of India implemented a promising programme of economic reform, and 18 months of instability in Pakistan ended with the installation of a democratically elected Government.

UNICEF/93-0035/Murray-Lee

The long-neglected girl child is a particular focus of UNICEF support in South Asia.

Prospects for development appear to be good.

Bangladesh, Bhutan, India, Maldives, Nepal, Pakistan and Sri Lanka — the seven member countries of the South Asian Association for Regional Cooperation (SAARC) — have ratified the Convention on the Rights of the Child. Afghanistan has signed it. The Convention is spurring revisions or reviews of child-related legislation in almost all countries. South Asian women's groups have called for independent national commissions with statutory powers to watch over the rights of children and women.

All the SAARC countries have completed their

Achieving the goal of raising the average age of marriage will be a key indicator of progress in improving the situation of girls.

UNICEF/SASOVille

NPAs for children. Bangladesh and India have also prepared SAARC Decade Plans of Action for the Girl Child (1991–2000), and others are in the process of doing so.

Overall, UNICEF took steps last year to help governments further refine NPAS in order to assist communities — especially women's groups — in organizing themselves and to mobilize political, social and economic institutions to meet mid-decade goals.

UNICEF supported South Asian countries in formulating work plans for achieving the mid-decade goals, and some progress was made. Surveys suggest that target immunization levels were sustained in Bhutan, India and other countries, although some decline was reported in Pakistan. Bhutan, which faces severe nutritional problems, is close to eliminating vitamin A deficiency. Nepal reduced infant, under-five and maternal mortality rates. Sri Lanka is at target levels of school enrolment. Bhutan, India and Pakistan reached target levels for safe drinking water.

To begin altering low nutrition and child growth levels, India last year adopted a national nutrition policy aimed at improving child nurturing practices. In Bhutan, the Food and Agriculture Organization of the United Nations (FAO), UNICEF and WHO cooperated to prepare a national plan of action on nutrition.

UNICEF-supported primary health care in Pakistan expanded, based on the Bamako Initiative approach. In South Asia as a whole, several plans are geared to implementing the concept of decentralizing authority to local communities and villages. India's Panchayati Raj system, now established in law, would accord powers to local governments and village-level health committees. One third of all seats in these new bodies are reserved for women. There is much interest in elections to the bodies, which could facilitate community involvement in programmes to raise health, nutrition and education levels. At the end of 1993, the incoming Government of Pakistan also announced an ambitious plan to train tens of thousands of village health workers. In Sri Lanka, UNICEF is working with Buddhist and Christian clergy to improve nutrition and health practices for children and women.

The UNICEF child survival and safe motherhood programme provides a mix of health services for pregnant women and infants of the region. In India, the programme operates in hospitals serving districts where one third of the country's population is concentrated. Interest in the initiative is growing in Nepal, Pakistan and Sri Lanka, where UNICEF last year presented provincial plans for the family health project. Pakistan's Ministry of Health is also taking action for maternal health care and family planning. UNICEF worked with voluntary and government agencies to upgrade monitoring of disease and health care in the region.

The baby-friendly hospital movement has grown in many countries. In India, following passage of a national law encouraging breastfeeding, a growing number of hospitals currently apply for official certification under the Infant Milk Substitute and Baby Friendly Act of 1992. UNICEF plans to expand the programme to provide training for treating diarrhoeal and respiratory diseases. In Nepal, UNICEF has been providing training for hospital staff in neonatal and baby-friendly practices since passage of legislation in 1992 to control breastmilk substitutes.

Training and supplies for ORT are being incorporated into many nations' health systems. One UNICEF pilot project last year delivered ORT to 95 health centres and completed 29 new ORT facilities in Bhutan.

Sexual exploitation of children is a growing problem for Sri Lanka in tourist areas. UNICEF developed educational programmes for children and government and voluntary organizations. With improved understanding of the problem,

legislation is being drafted to better protect children from such menace.

The universal basic education initiative provided a regional focus for UNICEF during 1993. Conferences in Dhaka and New Delhi built support for the New Delhi Education for All Summit in December. The gathering of Heads of State or their representatives from nine large-population developing countries was convened by India to revitalize government commitment to universal primary education. The summit was hosted by Prime Minister Narasimha Rao. Bangladesh, Brazil, China, Egypt, Indonesia, Mexico, Nigeria and Pakistan attended *(see also 'Education')*.

UNICEF assists primary and adult education programmes in most countries. In India, Pakistan and Sri Lanka, the organization worked with existing provincial programmes and fielded pilot projects and planning models geared to primary education in small communities. In Bhutan, Sri Lanka and several provinces of Pakistan, UNICEF also developed pilot programmes in non-formal education for adults.

When a World Bank study in Bhutan found three fourths of all children to be lacking in basic education, UNICEF developed a pilot project, the new approach to primary education (NAPE), which, in 1988, began sending educators abroad to acquire teaching and administrative skills. The project has led to reform of the entire primary education system in the country.

One innovative project, implemented for professional and lay religious Bhutanese, borrowed from the NAPE experience. UNICEF sponsored a 13-member delegation of senior Buddhist monks, who travelled to Sri Lanka to familiarize themselves with activities that Buddhist monks in that country have undertaken to better the lives of women and children. Several project proposals emerged from the study tour.

In preparing for emerging community-based government structures, UNICEF is building self-sustaining local programmes in the region and working with government, professional and voluntary organizations.

With UNICEF support, the Tamil Nadu state government last year launched legislation to establish compulsory education and to put a gradual end to child labour in several industries in the state. UNICEF has long advocated such measures to raise literacy levels. The legislation sparked interest in other Indian states, and this may one day lead to action on the national level. UNICEF also participated in hearings on a proposal to end child labour in India's carpet manufacturing industry.

The Tamil Nadu proposals were included in a 15-point programme, which the state's Chief Minister called a "Magna Carta" for children. All states last year began formulating comprehensive policies for child well-being in the framework of India's NPA.

UNICEF/5414/Kawasaka

Children in South Asia still spend long hours working for low wages in carpet factories, although efforts are being made to regulate child labour.

LATIN AMERICA AND THE CARIBBEAN

THE profile of Latin America and the Caribbean as a region of modern industry, commerce and tourism contrasts sharply with its social statistics. In 1993, about 46 per cent of the region's 440 million inhabitants were living in absolute poverty, and about 42 per cent of the poor were under the age of 18.

Almost 1 million under-five-year-olds die each year from causes that are largely preventable, and 7 million in the same age group are malnourished. Only half of those who enrol in primary school complete all grades, and about 12 million school-age children are not in school at all. An estimated 30 million children have jobs to supplement family income, and it is conservatively estimated that 15 million of those between the ages of 6 and 18 fit the definition of street children, working and sometimes living on the streets. For these young people, signs of the region's economic recovery in the 1990s are an illusion. While the middle and upper classes in much of the region enjoy standards of living similar to those in industrialized countries, the poor are trapped at subsistence level.

Cut-backs in social spending, low wages and massive lay-offs imposed by structural adjustment programmes in the 1980s have left their mark on the social fabric of every country in the region. A World Bank study of nine countries found that per capita expenditure in health, education and social security fell in all countries.

Continued high rates of unemployment and underemployment present a bleak outlook for the young, many of whom are neither studying nor working. Almost 100 million children will be old enough to go to work during the current decade, and many of them will be poorly equipped to make much headway for themselves or for their families. For women, who head many of the region's poorest families, access to paid employment has been both a blessing and a disappointment. Most suffer under discriminatory work and wage policies.

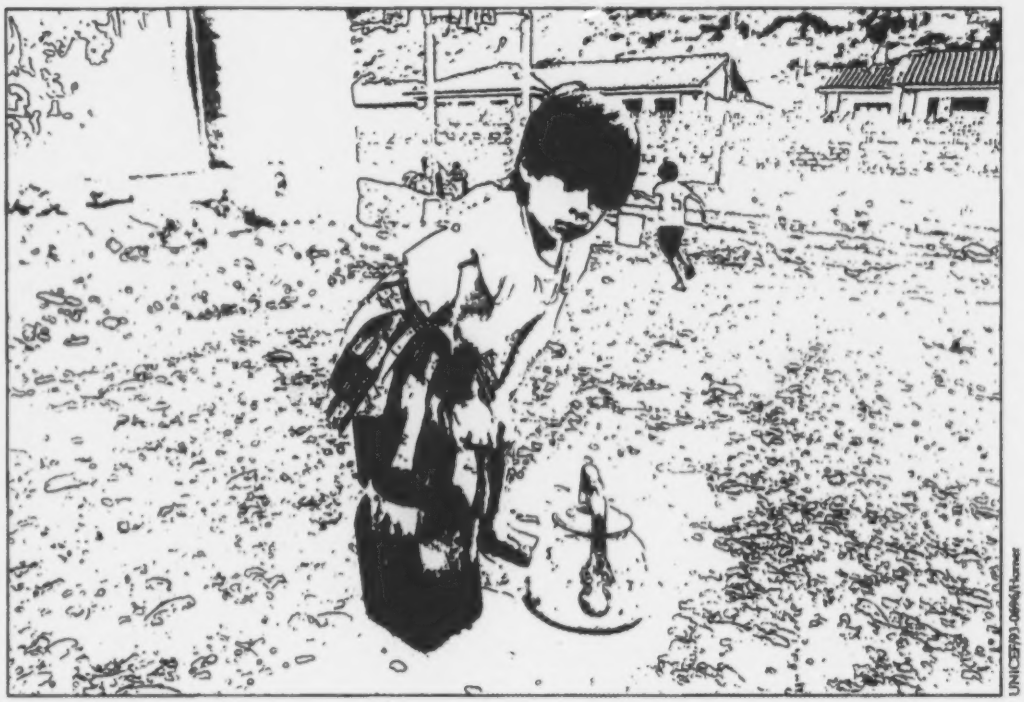
One of the main challenges for all nations will be to combine growth with social equity and give economic progress 'a human face'. This is an urgent task. The region is growing at a rate of about 13 million people a year, and the fate of the new arrivals will be decided early. Without basic health services to protect them through the first vulnerable years of their lives, or sufficient education to secure meaningful employment later, their futures will remain marginal, but with access to both, the children of the 1990s could also be the first generation of change. There are many hurdles, but in their favour is a broad political consensus on the need to invest in human resources and meet the goals established at the 1990 World Summit for Children.

All countries in the region, with the exception of Haiti, have ratified the Convention on the Rights of the Child, and most have incorporated its fundamental principles into national legislation and NPAs. A World Bank study for UNICEF estimated the total cost of achieving MCH goals in 25 countries of the region at US$3.5 billion. Even with slow economic growth, some of these countries could meet their goals by investing less than one fifth of 1 per cent of their GNP in the social sector, but the poorest countries will need external assistance ranging from US$400 million to US$700 million each per year.

Meanwhile, some 21,000 women continue to die each year from complications related to pregnancy, childbirth and illegal abortions — a conservative estimate given that 40–70 per cent of maternal deaths are thought to be unreported. Of those deaths 70 per cent occur in just six countries — Brazil, Bolivia, Colombia, Mexico, Peru

A challenge for Latin America is to give economic progress 'a human face'.

UNICEF/94715/Kenny



A heavy burden: A girl carrying water to her home stops for a rest.

and Venezuela — and at least 95 per cent are avoidable.

Efforts to prevent maternal mortality are doubly important because the risk factors for women are largely the same as those for newborns. About 41 per cent of infant deaths are due to the poor health and nutritional status of mothers and lack of access to medical care during pregnancy, childbirth and the postnatal period.

The needs of women did, however, advance on the region's political agenda during the year. They were discussed by the Andean Parliament, an association comprising Central American parliaments, which held a forum in Guatemala City in October to deal with the legal problems faced by women. Participants included members of legislative committees on women's issues, national women's bureaus and NGOs from all Central American countries.

Most UNICEF country offices also conducted workshops on gender issues for their staff, and a regional workshop on female leadership was held in the Costa Rican capital of San Jose in November for senior government officials in charge of development programmes for women. Representatives from most of the countries in the Americas and the Caribbean participated.

UNICEF continued to work with other United Nations agencies and intergovernmental bodies to promote legislation to protect the rights of women and children. Rights issues were raised in several major regional forums during the year, including the Third Ibero-American Conference of Heads of State and Government, held in Salvador (Brazil) in July, and at an international conference on development and poverty, held in Oaxaca (Mexico) in September. The Ibero-American Conference, attended by Heads of State or Government from 23 countries (all the Spanish- and Portuguese-speaking countries in the Americas, plus Spain and Portugal) endorsed the mid-decade goals for children.

The Mexico conference, attended by 37 Health Ministers from the Americas and the Caribbean, Africa and Asia, discussed approaches to EPI, ORT and ARI to prepare for the World Summit for Social Development, to be held early in 1995.

Data compiled by the UNICEF regional office for 26 countries on population, health, nutrition, education, water and sanitation, indicated that a number of countries, including Brazil, Bolivia, Guatemala, Haiti, Nicaragua and Panama, will have to reduce infant and child mortality rates at much faster rates than in the 1980s if they are to achieve their mid-decade goals.

A meeting attended by UNICEF Representatives and headquarters staff in Bogotá (in March) concluded that to enhance the achievement of mid-decade and year 2000 goals for children, support should be provided to improve the quality of basic services, the status of women, social

UNICEF/93-07130/Horner

Women in remote areas must walk long distances for health care.

mobilization, local capacity-building and a reordering of social spending priorities in favour of children and women.

In July, 34 mayors from the region attended the Second World Colloquium of Mayors in Mexico and formed a coordinating group to help promote NPAs locally. The group met in Quito in early November to discuss the design of municipal action programmes for children.

Despite large pockets of poverty throughout the region, considerable progress in the delivery of low-cost services was reported during the year. Goals for the reduction of neonatal tetanus are considered feasible throughout the region, and all countries, with the exception of Bolivia, Ecuador, Haiti, Paraguay, Uruguay and Venezuela, completed measles vaccination campaigns for children between 9 months and 14 years of age. The region's last case of poliomyelitis was reported on 5 September 1991 in Peru. With the help of the Pan American Health Organization (PAHO), most countries in the region are in the process of certifying eradication of the disease.

All countries are providing vitamin A supplements, and El Salvador, Guatemala, Honduras, Mexico and Panama report that blindness caused by vitamin A deficiency is declining sharply. Chile, El Salvador, Guatemala and Honduras are also pursuing the sustainable option of fortifying commercial sugar supplies with vitamin A. Venezuela is doing the same with flour made from wheat and corn.

Twenty countries still have problems with goitre caused by iodine deficiency, but the Andean countries, namely Bolivia, Colombia, Ecuador, Peru and Venezuela, have had great success in this area, and an interregional meeting in Quito is planned for the first half of 1994 to share the Andean experience and define a plan of action for universal salt iodization. Argentina, Chile, Costa Rica, Jamaica and Uruguay report that they have virtually eliminated non-iodized salt from the market-place. And Bolivia, Colombia, Ecuador, Guyana, Paraguay and Venezuela expect to achieve that goal during 1994.

UNICEF continued to support water and sanitation (WATSAN) projects in Bolivia, Ecuador, El Salvador, Guatemala, Guyana, Haiti, Honduras, Mexico, Nicaragua and Peru, and in the course of the year Argentina, Chile, Colombia and Cuba also initiated projects in this area. To achieve the region's mid-decade goals for this sector, the gap between people with access to safe WATSAN services and those without will have to be reduced by 22 and 24 million respectively. To meet the year 2000 goal of universal access, the region must provide safe water and sanitation services to an additional 176 million and 221 million people respectively.

A resurgence of cholera in 1992 did much to focus public attention on diarrhoea control and the benefits of ORT, which was later credited with saving 10 lives for every fatality. Good ORT coverage was reported during the year from the Caribbean countries, Chile, Costa Rica, Cuba, Uruguay and Venezuela. Mexico, where PHC efforts helped to raise coverage from 30 per cent to 84 per cent in just three years, anticipates 90 per cent ORT coverage by 1995. Although local production of ORS is rising throughout the region, it has yet to equal national demand.

Legislation to ban the distribution of free or low-cost breastmilk substitutes through maternity facilities is being promoted in almost every country in the region, but breastfeeding rates remain among the lowest in the world.

Good collaboration has been established with the Inter-American Development Bank. The Bank has contributed US$7.5 million in non-reimbursable funds for UNICEF-assisted programmes for working children in Central America and for a poverty alleviation programme in the Andean region (PROANDES), plus an additional US$6.2 million to support a UNICEF-assisted social development programme for low-income groups in Peru. A US$1 million regional basic education programme is under negotiation.

CENTRAL AND EASTERN EUROPE

A general deterioration in the condition of children and women followed the political and economic transition in Central and Eastern Europe (CEE), the newly independent States and the Baltic countries.

Virtually all countries were faced with recession and falling production, declining real wages and social benefits, higher living costs, rapidly increasing unemployment and homelessness. These, in turn, precipitated an alarming increase in social tensions. There was evidence, also, of a resurgence of infectious diseases due to a number of factors, including the poor quality of vaccines. A number of countries reported outbreaks of tuberculosis, diphtheria and cholera. These problems were compounded by a dramatic increase in the number and intensity of natural disasters and civil, ethnic, religious and political conflicts *(see following box)*.

In Azerbaijan, the continued armed conflict with Armenia over the disputed enclave of Nagorno Karabakh created major humanitarian problems, and the crisis in Georgia led to serious destruction of infrastructure and massive population displacements. Together with UNHCR and WFP, UNICEF participated in consolidated United Nations appeals launched by the UN Department of Humanitarian Affairs (DHA) for Armenia, Azerbaijan, Georgia and Tajikistan. Advances from the Emergency Programme Fund enabled UNICEF to respond quickly to urgent needs in all these countries, but on a limited scale.

UNICEF was active in 27 countries in the region during the year, compared with just one in 1990, but given the organization's mandate and priorities in the developing world, assistance had to be highly selective. UNICEF country programmes in Albania, Armenia, Azerbaijan and the Central Asian republics of Kazakhstan, Kyrgyzstan, Tajikistan, Turkmenistan and Uzbekistan provided vaccines, essential drugs and other health supplies, nutritional supplements, education supplies and technical assistance to improve the effectiveness of basic services for children and women. UNICEF was in the process of establishing field offices in all eight of these countries. In the Central Asian republics, UNICEF also helped to develop EPI plans of action and support for ARI and CDD programmes.

In Albania, the country programme supported the development of a better database of social indicators to monitor the effects of transition on

UNICEF/5015/Hartley

UNICEF efforts are focused on maintaining living standards for the region's children and women during the economic transition.

BEST COPY AVAILABLE

The future of the region depends on providing its people with adequate food, health care, housing and education.

UNICEF/A5071/K-sh

vulnerable groups, implementation of the Convention on the Rights of the Child and the development of an NPA. It also endorsed a donor consultation with UNDP on the needs of Albania's education sector.

In Romania, the first country in the region to receive programme assistance, several projects emphasized the need to educate and equip families to better meet the needs of children, particularly those in difficult circumstances. The projects included training for social workers, the modernization of approaches to juvenile justice, and the integration of disabled children into preschool and other education systems.

During the year, UNICEF also provided emergency health and nutrition supplies for children and women affected by armed conflicts in Armenia, Azerbaijan and Tajikistan, and continued to help meet the needs of children and women in the five republics of former Yugoslavia. It also provided emergency vaccines to the Republic of Moldova and took part in an inter-agency mission to that country to assess other urgent social needs.

Early in the year, Canada contributed some US$5.7 million for children and women in Belarus, the Russian Federation and Ukraine, and UNICEF followed up with programmes to provide essential drugs, vaccines, cold-chain equipment, medical supplies and related training and health promotion, as well as the development of

MONITORING THE SOCIAL COST OF TRANSITION

The human cost of transition in Central and Eastern Europe has reached alarming proportions, according to a project report from the UNICEF International Child Development Centre (ICDC). It cites the spread of poverty, falling birth rates, escalating death rates, declining school enrolments and an "unstoppable" crime wave as evidence of a crisis that, in relative terms, "appears even more acute than that recorded in Latin America and Africa during the 'lost decade' of the 1980s."

The Centre's MONEE project (Monitoring the Transition to the Market Economy in Central and East Europe) is tracking social conditions in the wake of economic and political reforms in nine countries* since 1989. Drawing on data from central statistical offices and regional policy centres, it found, among other things, that the crude death rate in the Russian Federation had increased by 32 per cent or 547,000 people a year between 1989 and 1993. During the same period, death rates rose by 17 per cent in Romania, 12 per cent in Bulgaria and by commensurate proportions in Albania and Ukraine. Despite some recent signs of recovery, poverty and death rates also surged in Poland. After plummeting in the first and second years of reform, social conditions in the Czech Republic, Hungary and Slovakia had stopped deteriorating, but only in the Czech Republic did conditions appear to be slowly returning to normal.

The report also found that child poverty rates had generally risen faster than those for any other group in the wake of unemployment, declining wage values, the less-than-proportional indexation of child allowances, the growing risk of being orphaned or living in a single-parent household, the reduction in preschool and other education services and their increased cost, and a general weakening of institutions entrusted with child care. Youth were also having greater difficulty finding jobs in protected labour environments and resisting pressures to become involved in semi-legal, illegal or openly criminal activities.

The report concluded that whatever the cause of current problems in the region, neglect of the social costs of transition could not be justified. "These costs are not only the cause of unnecessary suffering and waste of human lives, but also represent a source of considerable instability and social conflict that could threaten the entire reform process."

The MONEE project will continue to document the situation in the region and publish its findings every six months.

*** Albania, Bulgaria, the Czech Republic, Hungary, Poland, Romania, the Russian Federation, Slovakia and Ukraine.**

NPAs for children.

UNICEF is a member of the Inter-Agency Task Force for Chernobyl and collaborated with UNESCO on the establishment of four community rehabilitation centres for children and families affected by the disaster in Belarus, the Russian Federation and Ukraine.

The Convention on the Rights of the Child and the Declaration of the World Summit for Children have provided the framework for activities in all countries in the region. Much UNICEF support has been given through inter-country activities with emphasis on situation analyses and the preparation of NPAs. National Committees, NGOs and other partners have played an important role in this work.

Situation analyses on children and women were completed in Bulgaria and Poland and were under way in Albania, Armenia, Azerbaijan, the Czech Republic, Hungary, Romania and Slovakia. Action-oriented analyses have provided a basis for planning longer-term UNICEF cooperation in Bosnia and Herzegovina, Croatia, the Federal Republic of Yugoslavia (Serbia and Montenegro), the former Yugoslav Republic of Macedonia, and Slovenia. Several countries, including Albania, Belarus, Bulgaria, the Czech Republic, Hungary, Romania, the Russian Federation, Slovakia and Ukraine, were preparing NPAs.

Other regional activities included a two-year project in selected countries to eliminate iodine deficiency disorders by 1995, and a social monitoring project on the situation of vulnerable groups.

New National Committees for UNICEF were created in Latvia, Lithuania and Slovakia, and intensive work was done towards completing the process in the Czech Republic, Estonia and Slovenia. At the same time, existing National Committees in Bulgaria, Hungary and Poland were strengthened. A round table was held in Geneva in February to review and plan the Committees' information strategies, a series of television spots was produced by UNICEF to highlight major issues confronting children in these countries, and help was provided for the production of national versions of several UNICEF information materials.

In the course of the year, UNICEF also supported a number of seminars and workshops including: a training seminar on implementation of the International Code of Marketing of Breastmilk Substitutes, in Prague; three joint UNICEF/WHO training workshops on lactation management and the baby-friendly hospital initiative, in St. Petersburg; an education and development seminar on the preparation of young people for the challenge of change, in Sofia; and a seminar on children with disabilities, in the Lithuanian capital of Vilnius.

UNICEF/5559/Hanley

Many children living in remote, rural areas still have no access to health and social services.

EMERGENCY COUNTRIES

30

ARMED conflicts and natural disasters increased in 1993, leaving millions of families homeless, destitute and more exposed than ever to hunger and disease. Ethnic and other violence drove more than 18 million refugees into neighbouring countries and left another 24 million displaced within their own borders. The majority of the victims were children and women.

During the year, an estimated US$1.9 billion, or 3 per cent of official development assistance (ODA), was channelled bilaterally or through United Nations agencies and NGOs to support relief efforts in more than 42 countries. Many countries and concerned organizations provided additional support in the form of food, shelter materials and medical supplies. Emergency shipments through the UNICEF supply operation in Copenhagen totalled almost US$87 million, a 16 per cent increase over 1992.

Thousands of aid workers from the United Nations and other organizations braved hardship and danger to deliver this assistance, and three UNICEF staff members were killed in service in 1993.

UNICEF responded to emergency situations in a total of 64 countries, with an expenditure of US$223 million in 1993, of which more than US$189 million was spent in the 10 countries with the most serious emergency situations (*see chart on page 35*). These figures had increased from a total of US$111 million spent in 50 countries in 1991 and US$167 million in 54 countries in 1992.

Africa remained the continent in greatest need of emergency assistance and consequently was afforded the highest priority by UNICEF, receiving the largest share of all emergency expenditures in 1993.

Conflicts continued in Angola, Liberia and Somalia, and new ones erupted in Burundi and Rwanda. An estimated 1.5 million children are affected by the conflict in Angola, with relief efforts hampered in areas where safe access cannot be ensured. Nevertheless, by the end of the year UNICEF had provided assistance to 17 of 18 provinces, helping vaccinate over 860,000 children and women and supplying vitamin A supplements to more than 400,000 children. In addition, nearly 1 million people received seeds and tools. In the town of Malange, UNICEF established feeding programmes and provided shelter in response to the dire situation of 30,000 abandoned children.

The situation in Liberia called for continued and extensive assistance. Innovative interventions by UNICEF have helped restore access to WATSAN systems to 25 per cent of urban populations. Similarly, access to health centres increased from zero in many places to a target of 70 per cent. The provision of educational materials by UNICEF has encouraged students and teachers to return to schools in all of the country's 13 counties, and UNICEF continued to support counselling for war-traumatized children.

UNICEF/5160/Isaac

More than ever before, cities are the battlefields and children the victims of war.

UNICEF maintained one of the largest presences in Somalia throughout the year, supporting MCH centres and training more than 500 community health workers and 158 traditional birth attendants to develop a countrywide network of immunization centres. By the end of 1993, more than 750,000 children had received measles vaccinations, representing over 70 per cent coverage in most of the country. Water systems, wells and ventilated improved pit latrines were also constructed.

UNICEF supported the resettlement of refugees and displaced persons in Mozambique, providing some 750,000 tools and 3,500 metric tons of seeds to 200,000 people and bringing water to drought-affected resettled areas. Over 135,000 women and children were also immunized.

Other countries receiving emergency assistance were Eritrea, Ethiopia and Kenya in eastern and southern Africa, and the Congo, Côte d'Ivoire, Ghana, Togo and Zaire in West and Central Africa.

The Emergency Programme Fund (EPF) allowed UNICEF to respond quickly and generously to emergencies in a number of African countries and to build the regional capacity to prevent and plan for emergencies and to manage

and treat emergency-related stress and trauma. The increase in emergencies in West and Central Africa spurred a range of activities: Early warning systems and emergency training programmes were established and emergency communication systems were improved.

In Asia, the conflict in Afghanistan escalated dramatically, with major cities under attack, much of the country's infrastructure destroyed and an estimated 3 million people considered at risk, the majority of them women and children. A cholera epidemic also swept 22 provinces of the country, affecting 45,000 people. UNICEF interventions targeted primarily children and women, providing vaccines, ORS sachets, essential drugs and medical supplies, supplementary food and fuel. During the cholera epidemic, 1,200 water points were developed and/or repaired and 12,000 wells chlorinated.

Natural disasters such as the earthquake in

HIDDEN KILLERS

Land-mines come in all shapes and sizes and cannot distinguish between the footfall of a soldier and that of a child. They are designed to maim rather than to kill because wounded soldiers absorb medical resources, demoralize their comrades and help to slow an advancing military force. They also terrorize civilians.

Aerial mine-scattering systems can deploy more than 1,700 anti-personnel bombs a minute. Some are small enough to fit in the palm of a child's hand, and their bright colours and intricate shapes arouse curiosity. Some look like stones, some resemble pineapples. The infamous butterfly mines that were sown from the air across the fields of rural Afghanistan were nicknamed the 'green parrots' because of their attractive appearance and wings of liquid explosive that enable them to float lightly to the ground without detonating.

The scale of the land-mine problem almost defies imagination. It is estimated that there is one mine for every 20 children in the world today.

The region with the highest concentration of land-mines is Africa, in countries such as Angola, Mozambique and Somalia, but these hidden killers are also destroying the lives of children in Asia, Central America and the Middle East, as well as in Central and Eastern Europe.

Afghanistan is the most heavily mined country in the world, with between 10 and 15 million units. Angola is second, with 9 million mines in place and more being laid every day. An estimated 7 million active mines await the innocent in Cambodia, with two mines for every child. One in every 230 Cambodians is an amputee, and land-mines continue to claim about 300 victims a month. *The New York Times* reported recently that in former Yugoslavia some 60,000 land-mines were being laid every week.

Land-mines cost as little as US$3 to produce, are extremely difficult to detect and can remain active for decades. But the cost of removing them ranges from US$300 to US$1,000 apiece depending on the situation.

Kuwait has awarded contracts valued at almost US$1 billion for the removal of mines laid by Iraq during the Persian Gulf war. The job is being done by some 4,000 munitions experts from six nations — an operation that has exposed the grotesque fact that some of the foreign companies that produced and sold the mines now stand to make even greater profits by providing expert services to remove them.

Poor countries, however, do not have the option to clear their minefields at almost any cost and need to find more economical means (*see profile, 'Land-mines — A war on children'*). The United Nations is training Mozambicans to clear mines that were planted over some 4,000 kilometres of roadway in Manica, Tete and Sofala. UNHCR and a French-based NGO, Handicap International, are supporting campaigns to warn the public that undetonated mines, sown along transit routes and around villages and water sources during the war, continue to pose dangers even though security has improved.

In a statement to the 17th World Conference of Rehabilitation International in September 1993, UNICEF Executive Director James P. Grant called for a total ban on the production, marketing and use of land-mines — a call that has given momentum to a vigorous global campaign by more than 80 NGOs, and resolutions by the United Nations General Assembly in October, November and December 1993, and in January 1994.

The resolutions call for greater assistance for United Nations mine clearing efforts, a moratorium on the export of anti-personnel mines, a study of measures that could be taken to protect children from the indiscriminate use of all weapons of war, and a review of the 1980 Inhumane Weapons Convention.

India and floods and landslides in Nepal and the Philippines were the focus of emergency assistance in other parts of Asia. UNICEF also worked to help strengthen emergency response capacities in Cambodia, following the withdrawal of the United Nations Transitional Authority.

CEE and the countries of the former Soviet Union remained areas of concern and assistance in 1993. The tragedy in former Yugoslavia, Europe's worst political, military and humanitarian crisis since the Second World War, continued to have a devastating impact on children. An estimated 15,000 children have been killed and 620,000 displaced. Many children have been severely traumatized, particularly the thousands of young girls and women who have been raped. The needs of Bosnia and Herzegovina have been particularly overwhelming. And while not directly involved in the ground war, the former Yugoslav Republic of Macedonia and the Federal Republic of Yugoslavia (Serbia and Montenegro) have been affected by the influx of over 600,000 refugees and by pervasive economic devastation. Throughout the affected areas, UNICEF has worked to support immunization activities and provide school and medical supplies, supplementary feeding, trauma counselling and safe water.

UNICEF also provided essential medical supplies, drugs, vaccines and clothing to those affected by continued fighting in the enclave of Nagorno-Karabakh, involving both Armenia and Azerbaijan, and by the acute humanitarian emergency in Ossetia, Abkhazia and other regions that followed an outbreak of conflict in Georgia. Relief also went to thousands of families displaced by fighting in Tajikistan.

In the Middle East and North Africa, UNICEF was asked to coordinate humanitarian assistance in northern Iraq and the Sudan by the United Nations Department of Humanitarian Affairs (DHA). Ongoing efforts in northern Iraq — the largest UNICEF emergency operation — centred on the crucial storage and distribution of heating and cooking fuel to families and institutions (*see profile, 'Kerosene rescues families in more ways than one'*). UNICEF has also helped rehabilitate urban and rural water supply and sewerage systems throughout the country, renovate schools and provide educational supplies, support immunization campaigns and create programmes for traumatized children.

In southern Sudan, where conflict may affect 4 million people, Operation Lifeline Sudan, an ongoing UNICEF emergency programme, provided assistance to women and children in 45 locations in 1993, up from 7 locations in 1992.

UNICEF/Hamet

In modern warfare, children are frequently the targets of atrocities.

UNICEF joined an inter-agency appeal for Lebanon in August after the southern part of the country came under heavy attack from neighbouring Israel. In Algeria, continuing political instability prompted UNICEF to undertake emergency planning, preparedness and training activities.

In the Americas and Caribbean region, the political crisis in Haiti spurred emergency relief efforts to meet the needs of children and women, including UNICEF support for primary health care, immunization services and water supply and sanitation activities in rural areas. UNICEF also provided assistance for children and women affected by floods and landslides in Ecuador, for victims of a tropical storm in Cuba and Honduras and for indigenous children in communities in Honduras affected by insurgencies.

◆ **HUMANITARIAN ETHICS:** The guiding principles of humanitarian relief have always been impartiality, neutrality and humanity. The events of 1993, however, generated a great deal of soul-searching and discussion on the ethics and principles of humanitarianism — in particular, the delicate balance between national sovereignty and international solidarity with people in need. The international community's right to

UNICEF/6251/Toutounji

Formerly abandoned buildings, with few or no services, have become home to many children displaced by war.

send relief teams across borders unimpeded when innocent lives are at stake remained a grey area. Dramatic events in the meantime obliged the international community under the leadership of the United Nations to do its best to deliver assistance rapidly, effectively and in coordinated fashion.

Humanitarian interventions in northern Iraq in 1991 and Somalia in 1992 saved lives and were universally acclaimed, but attacks on United Nations peace-keeping forces in Somalia on 5 June 1993 diverted attention from the humanitarian operation and raised other serious issues. Among them: the use of children and women as human shields in armed conflicts; and support for a political process in situations where there is no single authority or government.

UNICEF participated in all major consultations and debates on the effectiveness of DHA during the year, and the 1993 regular session of the General Assembly later called on all United Nations agencies to fully support system-wide coordination under the Emergency Relief Coordinator. The General Assembly also reinforced the position of the Inter-Agency Standing Committee (IASC) as the ranking United Nations policy-making body on humanitarian matters.

As an active IASC member, UNICEF seconded headquarters and field staff to support DHA missions and task forces in 1993. It also continued to work closely with other United Nations agencies and with UNDP, UNHCR, WFP and WHO in particular. There was lively debate in IASC on the best use of the individual agencies' strengths in emergency situations, including the leadership role of UNHCR in former Yugoslavia, UNICEF in northern Iraq and southern Sudan and WFP in Angola. Each of these emergencies demonstrated that whenever DHA drew on the comparative advantages of operational agencies in the field, there was a significant added value to the United Nations effort.

Many of the difficulties that UNICEF faced in trying to deliver assistance to innocent victims of emergencies reflect wider issues that the United Nations, governments and the global public are also grappling with, and their responses are certain to affect the ability of UNICEF to meet humanitarian needs in the future.

◆ **SANCTIONS:** UNICEF helped broaden the humanitarian debate in 1993 by supporting studies on the impact of international embargoes on children in Haiti and Iraq. As the Under-Secretary-General for DHA put it: "Sanctions may be the best weapon the Security Council has, but they are a blunt weapon that punishes people who are not to blame."

◆ **GENDER:** It has been well documented that women are often most severely affected in emergencies, yet remain invisible as recipients of emergency relief assistance and, even more important, in terms of participation in policy-making, implementation activities and resource allocation. UNICEF thus moved towards the integration of gender issues in emergency programming. The protection of women and girls against violence will be an important element of all future UNICEF emergency interventions.

◆ **EMERGENCY RELIEF AND DEVELOPMENT:** The proliferation of emergencies of varying type, scale and complexity continued to tax UNICEF capacity, not only to respond adequately, but also to maintain and, where possible, increase its commitment to longer-term development. It is important to note in this context that only 5 per cent of the world's population in 1993 lived in areas affected by emergencies.

A system-wide task force was established in 1993 to help ensure the continuum from emergency relief to rehabilitation, reconstruction and development. UNICEF emergency interventions include the restoration of health and WATSAN systems; supplementary feeding programmes; trauma counselling for children and child sol-

diers; and immunization and other health-related activities, including provision of vitamin A supplementation and ORT.

These are development, as well as emergency, activities, reinforcing national efforts for rehabilitation and eventual recovery, and also helping in the achievement of mid-decade goals for children. With greater and more rapid involvement of parents and communities in these actions, the more effective and sustainable they will be and the more seamless the continuum to development in the areas of health, nutrition, WATSAN and education.

As descriptions of country activities reveal, increasing support is being given to programmes to provide psychosocial therapy for children traumatized by war-related experiences. In November, UNICEF programme officers from countries affected by war and civil strife attended a workshop in Lokichokio (Kenya) designed to help them address that need. Over the last year, the value and importance of ensuring basic education for children in emergencies has also emerged strongly. The rapid reopening of schools, even on a very limited basis, helps restore a sense of normalcy, especially for traumatized children, who often urgently and insistently ask for schools.

UNICEF/93-1007/Press

A refugee boy wears a bracelet that identifies his nutritional needs.

Education is a crucial element of emergency policy that UNICEF will promote further.

The UNICEF *Emergency Handbook* was revised during the year as part of a review aimed at strengthening the integration of emergency planning into normal country programming. Stabilization of the political, social and security situations in Ethiopia, Mozambique and Rwanda in 1993 enabled all three countries to prepare normal country programmes for Executive Board approval in 1994.

◆ EMERGENCY PROGRAMME FUND: The Fund remained one of UNICEF's most important

UNICEF EMERGENCY EXPENDITURE IN TEN COUNTRIES, 1991–1993

(in millions of US dollars)

COUNTRY**	PROGRAMME EXPENDITURE* 1991	1992	1993
Afghanistan	9.4	6.8	11.0
Angola	6.4	7.7	10.0
Ethiopia	7.5	10.2	5.8
Iraq	22.0	27.6	52.6
Kenya	0.1	6.3	12.0
Liberia	4.5	10.9	9.4
Mozambique	6.9	10.2	12.5
Somalia	3.5	27.3	31.1
Sudan	20.4	20.1	25.4
Former Yugoslavia***	0.2	13.3	19.4
Subtotal	80.9	140.4	189.2
Other emergencies	29.8	26.2	33.8
Total	110.7	166.6	223.0

* Excludes special accounts.
** Ten countries with highest UNICEF emergency expenditure.
*** Bosnia and Herzegovina, Croatia, former Yugoslav Republic of Macedonia, and Slovenia.

BEST COPY AVAILABLE

means of responding rapidly to emergencies in 1993. A total of US$21 million was allocated from EPF during the 1992-1993 biennium to meet interim emergency needs pending the receipt of donor contributions.

Africa, with 6 of the world's 10 major complex emergencies (Afghanistan, Angola, Haiti, Iraq, Liberia, Mozambique, Somalia, the Sudan, former Yugoslavia and Zaire), received 38 per cent of total EPF allocations to the field. Europe, primarily CEE countries and the newly independent States, received 30 per cent, and the nations of the Americas and the Caribbean, Asia, and the Middle East and North Africa, received 16 per cent, 9 per cent and 7 per cent respectively.

◆ INFORMATION AND ADVOCACY: With media attention focused on Somalia and former Yugoslavia, UNICEF arranged frequent media briefings and speaking tours to generate additional coverage.

UNICEF information staff visited a number of countries to provide first-hand reporting on emergency activities and to improve communications with field personnel.

The organization participated in documentary video productions on southern Africa, Angola, Mozambique, Romania, Somalia, the Sudan and former Yugoslavia through the BBC World Service, CNN, Reuters TV, the European Broadcasting Union and PBS.

A brochure entitled *Children Under Siege* highlighted the needs of children in conflict situations and the UNICEF response in Sarajevo, in particular.

Emergency information notes, press releases and news features were issued regularly during the year to keep National Committees, field offices and the media abreast of UNICEF activities. Advisories and letters to editors were prepared to counter adverse publicity, and a database on emergency operations was being developed to support UNICEF information activities.

EMERGENCY OPERATIONS STAFFING IN TEN COUNTRIES

(As of December 1993)

Country*	No. of staff	No. of locations
Afghanistan	135	8
Angola	93	5
Ethiopia	9	1
Iraq	96	4
Kenya	102	2
Liberia	164	1
Mozambique	11	3
Somalia	162	8
Sudan	135	12
Former Yugoslavia**	126	11
Total	1,033	55

*Ten countries with highest UNICEF emergency expenditure.
**Bosnia and Herzegovina, Croatia, former Yugoslav Republic of Macedonia, and Slovenia.

Emergency expenditures have almost tripled since 1991, and UNICEF responded to emergencies in 64 countries in 1993.

UNICEF/93-1031/Press

EL SALVADOR

Land-mines — A war on children

El Salvador: March 17 — "A 12-year-old boy died in Morazan Province yesterday after stepping on a mine that was hidden underground in an empty lot." April 6 — "Three siblings died near the Guazapa volcano last weekend when one of them stepped on a mine that had been planted during the civil war. Ironically, their parents had returned to the area just a few days earlier. The children were four, six and eight years old. Parts of their bodies were found as far as 30 metres from the explosion site."

News reports like these, months after El Salvador began implementing a peace plan to end the 12-year civil war in January 1992, convinced UNICEF that some deadly unfinished business awaited the Government and the FMLN (Frente Farabundo Martí para la Liberación Nacional) forces. The question for both sides was: How many of their unexploded mines remained hidden in the countryside and where?

UNICEF, the government armed forces, FMLN and the United Nations Peace-keeping Mission cooperated on a Mine Awareness Project to identify danger zones and to educate the public, children in particular, about the menace lurking in fields and neighbourhoods. Some 20,000 active mines remained scattered over 71 per cent of the country, which has a population density of 247 people per square kilometre, making the daunting clearance task more urgent.

Most were home-made devices constructed largely of plastic and PVC that made them difficult to detect. As part of the project, surviving FMLN members drew simple maps and diagrams of mined areas, which fortunately coincided with data on suspected minefields gathered by United Nations peace-keepers. By piecing this information together, it was possible to draw more definitive maps, which UNICEF used in a nationwide campaign to inform children and adults about what to do if they encountered a suspicious object.

UNICEF produced two posters, 5,000 copies of which were put up in schools, medical clinics and other public places. Armed forces, FMLN members and United Nations peace-keepers posted 10,000 warning signs depicting a skull and crossbones and the words 'Danger! Mines!' on stakes around 192 minefields. UNICEF held press conferences at designated minefields and coordinated a public safety campaign through newspapers, radio and television, and schools. A mobile team was trained and sent to educate communities in high-risk areas, and schoolchildren were given mine alert leaflets with diagrams and simple wording to take home to parents. The team contacted almost 1,000 teachers and school administrators and provided basic training for health workers, community leaders and NGO staff.

More than 25,000 land-mines were detected and marked within six months and, in 1993, work started on disarming and clearing them so that families could return to their fields and farms in greater safety. By the end of the year, 75 per cent of existing mines had been cleared and, if the absence of news reports of deaths and injuries to children and other civilians is any indication, the campaign has been extraordinarily successful. UNICEF spent US$275,000 on the preparation of posters, signs and educational materials and on transport for the mobile team, and the Government spent US$5.2 million on mine clearance operations, which were contracted to a foreign company.

In a world where an estimated 100 million land-mines have been planted in more than 60 countries and another 100 million are stockpiled for sale and use, the operation in El Salvador is one small example of a relatively low-cost solution that worked well and that other developing countries might follow.

CHILD RIGHTS

UNICEF/Hamer

THE CONVENTION ON THE RIGHTS OF THE CHILD

THIS landmark human rights legislation, codifying children's rights and helping crystallize efforts to improve their lives, has been ratified by more countries, and in shorter time, than any other human rights treaty. It is likely to become the first universally ratified human rights convention in history.

By the end of the year, 154 countries had ratified the Convention, largely thanks to a campaign launched on 24 March 1993 to reach universal ratification by 1995. As of end-December, only 36 countries had yet to ratify.

UNICEF has worked with numerous partners and used a combination of strategies to help accelerate the ratification process, including liaising with ambassadors to the United Nations in New York, writing letters to Heads of State who signed the World Summit Declaration, and employing advocacy at the Islamic Conference of Foreign Ministers and at the World Conference on Human Rights (WCHR), held in Vienna (14–25 June). UNICEF also intensified its field-level follow-up with appropriate ministries.

◆ WORLD CONFERENCE ON HUMAN RIGHTS: Child rights were an important element of the WCHR debate, with a full day of discussion devoted to them.

The Conference, the first global follow-up to the International Human Rights Conference held in Tehran 25 years earlier, endorsed the UNICEF principle of 'first call for children'. It also underlined the importance of national and international efforts to promote respect for the rights of the child to survival, protection, development and participation. It called for ratification of the Convention and for effective measures to combat such practices as female infanticide, harmful child labour, the sale of children, and all forms of sexual abuse of children, including child prostitution and child pornography.

The interrelation and indivisibility of human rights as reflected in the Convention — with economic, social and cultural rights acknowledged as equal in importance to civil and political rights — was affirmed by the Conference. Links between human rights, democracy and the universality of human rights in all cultures and traditions were also recognized.

Hundreds of organizations, including UNICEF, used the occasion to throw a spotlight on specific human rights abuses, including the rape of women and girls in Bosnia and Herzegovina, the deliberate targeting of children in war and the recruitment of child soldiers in wars in Africa and elsewhere.

UNICEF/1232/Sprague

The right of all children not only to survive but also to develop to their full potential is enshrined in the Convention.

Great attention was given to the rights of women at the Conference, a development that could only benefit children as well, as a number of observers remarked. As the Conference discussed and reaffirmed the rights of women, the inseparable rights of the girl child were also acknowledged.

More than 1,700 media representatives attended the Conference, and media encounters and briefings, organized by UNICEF to highlight issues related to child rights, resulted in wide coverage in national and international media.

As requested by the Conference, the United Nations General Assembly called on the Secretary-General to prepare a report on children in armed conflict. And, on Human Rights Day (10 December), the General Assembly awarded one of the annual Human Rights Prizes to UNICEF Executive Director James P. Grant for his work in child survival, development and rights over the past two decades.

◆ THE CONSULTATIVE GROUP ON CHILD RIGHTS: This internal, interdivisional group, appointed by the UNICEF Executive Director in 1990 to facilitate the ratification and implementation of the Convention, held its annual meeting in Florence in September. The Group discussed the need to link implementation of the Convention on the Rights of the Child to the Convention on the Elimination of All Forms of Discrimination against Women; the need for UNICEF to intensify its advocacy against the sexual exploitation of children; and the need for

The Convention stresses the importance of supporting families in their child-rearing responsibilities.

UNICEF/5842/Hanley

UNICEF to be more vocal when children's rights are flagrantly violated, especially in situations of armed conflict.

A report of the meeting's discussions and recommendations was widely circulated to promote the integration of the Convention into UNICEF-assisted country programme activities.

◆ THE COMMITTEE ON THE RIGHTS OF THE CHILD: The Committee, which is responsible for reviewing reports by ratifying countries on their compliance with the Convention and discussing those reports with governments, held two sessions and two pre-sessional meetings in 1993. It reviewed a total of 11 country reports. In all, 30 country reports had been received by the end of December. Economic exploitation was a major theme of the Committee's discussions with governments.

During the year, the Committee visited the Philippines, Thailand and Viet Nam. It met with representatives of United Nations agencies, local NGOs and children, and it gave special attention to the situation of children working in brothels in northern Thailand and at garbage dumps outside Manila. In Viet Nam, it focused on the difficulties of children in conflict with the law.

◆ CHILD RIGHTS INFORMATION NETWORK: UNICEF began to develop electronic networking as a means of exchanging experiences and information on the Convention and child rights among field offices. A database with a corresponding electronic conference function was set up on ChildNet, an electronic network.

A CHILD AGAIN

Freetown, Sierra Leone: Nine-year-old Nelson K. is learning what it is like to be a child again. Holding a book and pen instead of a rifle, he is one of several hundred child soldiers the Government has begun to reintegrate in civilian life, even as war rages in various parts of the country.

Nelson was released from the army in 1993, when Sierra Leone ratified the Convention on the Rights of the Child. Article 38 of the Convention requires States parties to prevent the direct involvement in military conflict of children under 15 years of age. Sierra Leone is now one of several nations working with UNICEF and national and international NGOs to rehabilitate thousands of young 'Nelsons' who were forced to surrender their childhood to adult causes.

UNICEF has so far funded three transitional centres for 361 former child soldiers who have served with both government and opposition forces. The centres provide shelter, food, medical care, trauma counselling, basic education and vocational training to prepare the children for a more productive life in civilian society. Over a three-year period, to December 1996, the three centres are expected to be able to provide for 1,000 children. In addition, a national programme will focus on the needs of an estimated 78,000 children living in war-affected communities.

Many of the children fit the profile of Nelson K. Orphaned by the war, addicted to drugs and traumatized by his experiences, Nelson suffers intense pain and daily bouts of screaming. No one knows just how long it will take for him to adjust to a more normal life.

As war continued in Sierra Leone during the year, it was difficult to establish a sense of normalcy. Although about 200 children were reunited with their parents, a quarter of those families were homeless and destitute. UNICEF supported them through income-earning activities and parental education on how to deal with problem children.

In spite of these efforts, about 40 children rejoined the armed forces and small numbers were living on the streets. Support will be channelled through NGOs in an effort to find productive activities for street children. UNICEF was also involved in efforts to rehabilitate health centres and schools that had been damaged or destroyed by war.

Sierra Leone's initiative to implement a key provision of the Convention in such a dramatic way in the midst of war is unique, and UNICEF hopes that other nations will be persuaded to follow this example.

BEST COPY AVAILABLE

HOSHINA, BHUTAN

Bhutan's gods and goddesses meet Western medicine

As the smoke of the incense curls its way to the ceiling, Kencho Pem shakes rice in a small basket. "It's like reading a book," she says, as she gazes into the basket and reads the patterns of the rice before her, trying to determine the seriousness of her patient's complaint.

Sometimes she can identify a spirit that has taken possession of the household through a rock or a cooking pot, in which case she might advise the owner to discard the item. But if the problem is serious she will place a wooden head-dress over her tightly cropped grey hair and summon help by beating a drum and ringing a bell. The head-dress has five prongs, each of them carved in the image of a personal God who will speak through her chants as she falls into a trance. Several times a day, Kencho Pem wraps up her healing instruments — the drum, the bell and the head-dress — and goes out to make house calls.

Every village in this Himalayan kingdom of 600,000 people has one or more healers. A sick person consults the village monk *(gomchen)*, astrologer *(tsip)*, male diviner *(pau)*, female diviner *(paum)* or healer *(jankri)*. Most people believe that physical and mental well-being is maintained by a balance of good and evil forces. Some believe that modern medicine angers the spirits and should not be used unless all else fails.

However, some healers, like Kencho Pem, are sufficiently open-minded to try all avenues in a crisis. Two winters ago, when Kencho Pem's five-month-old daughter contracted a respiratory infection, the rice patterns revealed that her situation was hopeless. The healer and her husband, a farmer, carried the child to a hospital in the capital, Thimpu, where she died. Unfortunately, many other parents in Bhutan also seek modern medical care too late.

Although the Royal Government of Bhutan provides free health care, Bhutan's child mortality rate is the highest in South Asia (205 deaths per 1,000 live births) and one of the highest in the world. The most frequent causes of death are from ARI and diarrhoea.

"The health department now reaches south to north, east to west," says Tashi Dendup, a 28-year-old Buddhist monk. "But the people are used to the old way of thinking, and modern methods are slow in coming." Tashi Dendup serves as project manager for a UNICEF-supported religion and health project that aims to introduce modern health care and improved water and sanitation through monks and traditional healers like Kencho Pem.

The five-year project, now in its third year, has enlisted the support of Bhutan's monastic leaders as well as village monks and traditional healers. The goal is for them to link the old ways and the new. The project will teach them basic health care principles that they will pass along in their communities by word of mouth.

A task force comprising staff from Bhutan's Department of Health Services and the national monk secretariat, the Dratshang Lhentshog, has been formed to develop health and hygiene manuals and a training curriculum for about 40 monks. They will in turn train monks at 15 monastic schools and district monasteries on health and hygiene, case management of diarrhoea and ARI, and the preparation of nutritious foods.

Following a pilot programme in three of Bhutan's 20 districts, the initiative has been expanded to include four others. The project will be evaluated in 1994. In keeping with the importance of monastic teaching by personal example, UNICEF has also supported the upgrading of WATSAN facilities in seven of the country's 20 district-level monastic schools.

When Tashi Dendup tries to persuade monks and healers to consider new approaches, he often cites ancient Buddhist scriptures. "Lord Buddha always said that you should be clean in your surroundings, your body, your clothes and your food, and if you are not clean you will not live happily in this world."

PROGRAMMES

UNICEF/65178/Isaac

CHILD HEALTH

PRIMARY HEALTH CARE

THE UNICEF partnership with WHO to strengthen the PHC system focused on three main areas during the year.

The first was on strengthening local governance, participation and financing for PHC activities through the Bamako Initiative and related efforts. This work included support for national policy reforms to facilitate community-level activities in countries where the Bamako Initiative is under way.

The second major emphasis was on the strengthening of national programmes that rely on the PHC system and, in turn, help to strengthen it. The most notable of these is child immunization, and UNICEF continued its efforts to improve community-level disease surveillance as a means of supporting outreach and overall quality control.

The third main area of emphasis was health information and social mobilization to create informed community demand for essential MCH services.

The main building blocks for an expanded PHC system are community partnerships, improved maternity care, preventive and curative child care, first referral capacity for more complicated cases (including hospitalization for children who cannot be treated on an out-patient basis) and access to quality supplies.

UNICEF continued to support the improvement of linkages between PHC centres and district hospitals, particularly in the areas of paediatric and emergency obstetric care. Community-based surveillance methods are being further developed in several programme areas together with efforts to strengthen partnerships between the PHC system and women's and youth groups, schools and religious institutions.

Collaboration was expanded with WHO and other partners on the development of technical intervention packages for reproductive health and safe motherhood, preventive health care against common childhood illnesses, and improved curative health care strategies for diagnosing and treating childhood diseases.

Further efforts to strengthen UNICEF's role as a supplier of vaccines and essential drugs were initiated in 1993. Of particular concern is the need to maintain high standards of quality control and to ensure that supply lines are sustainable.

These efforts will continue through 1994 as part of the children's vaccine initiative (*see also 'Building on immunization success'*) and a planned global conference in Brazil (June 1994) on access to affordable essential drugs.

THE BAMAKO INITIATIVE

THE community-management approach to PHC embodied in the Bamako Initiative continued to gain acceptance in 1993. By the end of the year, five more countries (Burkina Faso, Chad, Côte d'Ivoire, Niger and the Sudan) had joined the Initiative, bringing the total up to 30*. With well-documented success in sub-Saharan Africa, nations beyond the region were exploring the possibility of following suit. Preparatory work was under way in Cambodia, Nepal, Pakistan and Yemen. Three non-African countries (Myanmar, Peru and Viet Nam) are already implementing the community-focused approach to health.

◆ COST-EFFECTIVENESS: Experience in the first six years of the Initiative has confirmed that even in low-income countries, people are prepared to pay a reasonable fee for the use of local facilities if the quality of health services improves, if the resources generated are reinvested in the community, and if users have a say in the way their health facilities are managed. In Cameroon and Mauritania, monitoring of community management under the Bamako Initiative has shown that people who once shunned poorly run local facilities are now using them again and saving money on the cost of drugs and transportation to centres further afield.

More important, communities that have the Bamako health care concept well established are beginning to reap benefits in terms of improved immunization coverage and protection against diarrhoeal diseases and malaria. Experience in many countries has shown that the Initiative is one of the most cost-effective and sustainable approaches to the revitalization of health care systems in countries with poor PHC structures, and it has been a factor in increasing and sustaining immunization and other protective health coverage.

◆ COUNTRY PERFORMANCES: In Benin, the Bamako Initiative is the pillar of national health policy. With UNICEF support, 200 health centres covering some 58 per cent of the population have

UNICEF/Pacozzi

Deliveries through the Bamako Initiative ensure that health centres stock the medicines their communities need.

introduced community cost-sharing and co-management of health facilities. Health centres in the rest of the country are supported by other donors along the same lines.

More than 85 per cent of the health centres supported by UNICEF have been able to recover local operating costs, including drug supply. As of June 1993, immunization coverage was 86 per cent for BCG, 71 per cent for polio, 84 per cent for DPT1, 77 per cent for DPT2 and 73 per cent for DPT3. Seventy-five per cent of pregnant women had antenatal consultations, and 63 per cent of births were attended by trained staff. The average cost per patient to visit a health centre was US$0.50, including the cost of generic drugs and transportation. Vaccine and staff salary costs were not contained in this estimate.

Guinea has also achieved nationwide coverage with the Bamako Initiative. In 1987, there were only 31 operational health centres in the country and immunization coverage was less than 5 per cent of the child population. Six years after launching the Initiative, 265 health centres have been established, and it is expected that 340 will be operational by the end of 1995. According to a 1993 immunization survey, areas where the Initiative has been established have achieved 76 per cent coverage for BCG, 72 per cent for DPT1/polio3, 55 per cent for DPT/polio, 57 per cent for measles, and 70 per cent for protection against tetanus for pregnant women.

In Rwanda, by the end of the year, 127 of a planned 185 health centres had adopted the Initiative strategy and provided coverage for about 3 million people in 10 prefectures. As a result, the centres were better stocked, and communities were investing in drugs, maintenance, incentives for health workers and other small items, while retaining about 25 per cent of the revenues generated for future use.

◆ OPERATIONS RESEARCH: The Bamako Initiative Management Unit at UNICEF has been promoting operations research to strengthen some aspects of the Initiative. The research programme has support from the Governments of Norway and the United Kingdom and from Canada's International Development Research Centre in six areas: community participation; equitable access to health services; staff motivation; sustainability of health structures and systems; drug management and quality assurance; and improved health care quality.

◆ CHALLENGES: Although the Bamako Initiative has made significant progress in reviving and strengthening government-run health systems, there are some hurdles to its rapid expansion. Local capacity to purchase good-quality drugs at reasonable prices remains weak, and new supply partnerships between the private and public sectors will have to be explored. Public resistance to the use of generic drugs will also have to be overcome. Community-based monitoring must be improved, community awareness developed, and women must become more active in health services management. More attention will also have to be given to urban health care.

◆ ALLIANCES: During 1993, UNICEF worked closely with WHO, the World Bank, the German Agency for Technical Cooperation (GTZ), the United States Agency for International Development (USAID), the Government of France and the European Community.

* Benin, Burkina Faso, Burundi, Cameroon, the Central African Republic, Chad, Côte d'Ivoire, the Congo, Equatorial Guinea, the Gambia, Ghana, Guinea, Guinea-Bissau, Kenya, Lesotho, Madagascar, Mali, Mauritania, Myanmar, Niger, Nigeria, Peru, Rwanda, Sao Tome and Principe, Senegal, Sierra Leone, the Sudan, Togo, Viet Nam and Zambia.

BUILDING ON IMMUNIZATION SUCCESS

AT the beginning of 1993, the world seemed to have sustained the 80 per cent global immunization rate achieved in 1990, in terms of the three doses of diphtheria, pertussis (whooping cough) and tetanus toxoid (DPT) vaccines for children under one year of age.

Within the global average, however, there were variations by region and country. Among

the regions, DPT coverage ranged from 91 per cent in East Asia and the Pacific and 87 per cent in South Asia, to 62 per cent in East Africa and 42 per cent in West and Central Africa. Certainly in Africa as a whole, and in other countries with difficult conditions and weak infrastructure, coverage has dropped.

Among the antigens, measles and tetanus toxoid coverage continue to present a challenge. Of the nearly 120 countries reporting in 1992, 76 countries had at least 80 per cent coverage of infants with three doses of oral polio vaccine; only 69 had measles coverage levels of less than 80 per cent, and 23 had rates below 60 per cent. As in past years, tetanus toxoid coverage for pregnant women lags behind other antigens, at about 43 per cent.

Many programmes have begun to implement EPI-Plus, building on the lessons learned and on the facilities and systems established in successful immunization activities. In health centres and clinics around the world vitalized by the success of UCI, immunization programmes are opening avenues of access to other primary health interventions. Parents are being taught about ORT and child growth monitoring, and their children are receiving vitamin A supplementation when they are immunized. In Somalia, for example, during a successful immunization campaign, 700,000 children — nearly 50 per cent of the total under-five child population — received one dose of measles vaccine and were given vitamin A supplements.

As global coverage levels held, the transition in UNICEF programme strategy continued from concern with immunization delivery to concern with immunization impact. Increasingly, programme focus is strengthening efforts to assess and analyse how immunization levels affect patterns of disease and death in communities, and to monitoring progress towards the mid-decade and year 2000 goals for children related to eliminating polio and neonatal tetanus and controlling measles and pertussis.

◆ SURVEILLANCE AND DISEASE ELIMINATION: Surveillance systems, crucial components in public health progress, are being strengthened with the assistance of UNICEF and its partners to monitor the incidence of diseases and patterns of outbreaks and to work to control them. Such activities have been key to the success achieved so far by the campaign to eliminate polio in selected countries by 1995. Figures show that reported polio cases fell from 60,000 in 1982 to 14,500 in 1992. The Americas and Caribbean region has remained polio free since 1991. No cases of polio were reported in the countries of North Africa's Maghreb Union and in several countries of southern Africa. In 1992, there were 109 countries reporting no cases of polio for three years or more, an improvement over 102 countries in 1991.

Similarly, in efforts to reach the mid-decade goal of eliminating neonatal tetanus, improved surveillance techniques are helping to identify

UNICEF/5311/Horner

Although the goal of 80 per cent global immunization was achieved in 1990, continuous efforts are needed to maintain and increase it so that children are protected against the six life-threatening childhood diseases.

UNICEF/6333/Thomas

A malnourished refugee child is immunized against measles and receives a vitamin A capsule at a UNICEF-assisted outreach clinic. Just two capsules a year are enough to prevent vitamin A deficiency.

and target areas of high risk. Egypt, for example, made great progress — lowering neonatal tetanus infection rates by 33 per cent between 1991 and 1992 — by identifying eight high-risk governorates.

China started a tetanus toxoid immunization programme for women of child-bearing age in 300 counties found to be areas of high risk. Viet Nam is concentrating on 57 districts, and the Philippines is giving special attention to certain provinces and districts. Reports from Central America indicate that 293 out of 1,085 municipalities are high-risk areas in need of special attention.

◆ CHILDREN'S VACCINE INITIATIVE: UNICEF continued to play an important role in the children's vaccine initiative (CVI), a broad-based coalition of organizations and distinguished research scientists committed to improving children's health through the development and sustainable delivery of existing and new vaccines.

Ensuring a supply of affordable vaccines is crucial to the continued success of UCI. In 1993, a CVI task force sponsored teams of experts to visit Bangladesh, Egypt, India, Indonesia, Iran, Mexico, Pakistan, the Philippines, South Africa and Viet Nam to develop national vaccine supply plans, assess local production capacity and evaluate quality control.

Also during the year, as part of CVI efforts, UNICEF commissioned a study of the global vaccine market. The study examined vaccine costs, the impact of UNICEF's position as a high volume/low profit margin customer and the prospect of access to new vaccines, among other subjects.

The study results underscored the importance of more accurate vaccine forecasts at country level, as well as the need for close collaboration and partnership with vaccine suppliers. These steps can improve production planning and help keep EPI vaccine prices low. The analysis is expected to be important as UNICEF negotiates with manufacturers to help ensure reliable vaccine supplies and access to new vaccines as they are developed.

◆ VACCINE INDEPENDENCE INITIATIVE: This initiative provides support for vaccine planning, financing and procurement to countries intending to assume the cost of their vaccine supply, but needing more flexible credit terms than are generally available. Under the initiative, governments establish a budget line for vaccines and then procure them through the UNICEF Supply Division, using, where necessary, a revolving fund established by UNICEF to bridge the time between payments. Countries can repay the revolving fund in local or hard currency. The vaccine independence initiative is currently being used by Bangladesh, Morocco and the Philippines. Several other countries, including Mongolia, Namibia and the Pacific Islands, have also expressed interest.

ACUTE RESPIRATORY INFECTIONS

MOST of the 3.6 million children who died of pneumonia and other respiratory infections during the year could have been saved if parents and health workers had recognized the danger signs and if low-cost antibiotics had been available.

The warning signs of acute respiratory infections (ARI) include fast or difficult breathing. Antibiotics in tablet or liquid form cost approximately US$0.25 to treat a bout of pneumonia.

Although more than 60 developing countries had targets for ARI control in 1993, only 12 per cent of these had nationwide activities to combat pneumonia. The challenge is to provide communities with the basic knowledge and drugs necessary to manage ARI. Meetings were held in Africa, Asia and Latin America during the year to mobilize NGOs to help in the control of ARI,

pneumonia in particular. In some remote areas, NGOs are the only organizations providing health care.

In sub-Saharan Africa, the Bamako Initiative has opened the door to community management of ARI as part of the overall health care and essential drugs package. Twenty-seven countries in the region have so far implemented the Initiative, and several outside Africa are following suit or planning to do so (*see also 'The Bamako Initiative'*).

Other countries, including Indonesia and Thailand, were considering reviving drug cooperatives to supply antibiotics for ARI case management. Limited management training has constrained the effectiveness of cooperatives in Indonesia. A study in Thailand by Johns Hopkins University showed that while 95 per cent of workers in some areas had been trained, only 55 per cent had medicines to dispense.

In Bangladesh and Iran, ethnographic surveys of community perceptions and beliefs about diseases and how to prevent and treat them led to the redesign of health messages and communication strategies to include local names for the various diseases.

In Nigeria, a workshop was held to develop ARI strategies within the PHC system for all 64 local government districts. Guidelines were developed for training, communications, drug supply and monitoring.

At a four-country meeting in Bangladesh (26–29 July), which brought together representatives of Bangladesh, Egypt, Mexico and the Philippines, questions related to ARI and case referrals were developed for use in household surveys. EPI surveys were also modified to assess mothers' knowledge about ARI and pneumonia. The inclusion of questions related to ARI will allow for cost-effective monitoring over much larger areas at more frequent intervals than would otherwise be the case.

Almost every country in Asia and Latin America has set a mid-decade goal of establishing standard case management for ARI in at least 25 per cent of health facilities. African nations do not as yet have specific goals for controlling ARI but have committed themselves to strengthening health facilities to provide effective case management.

Standard ARI case management would ensure that the condition of every patient is assessed against defined criteria, classified according to the severity of the disease and treated in keeping with that classification.

UNICEF/Jacques

Health workers often have to travel long distances in remote areas where not even a bicycle can help them on their way.

CONTROL OF DIARRHOEAL DISEASES

INCREASED fluid intake and continued feeding for a child with diarrhoea is the standard procedure taught at some of the world's most prestigious medical schools, but elsewhere, costly drug treatments continue to prevail over low-cost, more effective solutions. WHO estimates that more than US$1 billion is spent every year in developing and industrialized countries on antidiarrhoeal medicines that are useless and often harmful.

UNICEF and WHO have set a goal of 80 per cent ORT use in the treatment of diarrhoeal dehydration for young children by the end of 1995, but despite its simplicity, low cost and proven effectiveness, ORT remains a hard sell. Each year 3 million children in the world's poorest communities continue to die from diarrhoeal dehydration, largely because their parents remain unaware of or unwilling to use ORT. ORT was discovered 25 years ago in Dhaka by the International Centre for Diarrhoeal Disease Research, Bangladesh and was moved to the top of the UNICEF child survival agenda in the early 1980s. But with just two years to the mid-decade, only one child in three with diarrhoea receives ORT at home.

However, many countries are aware of the value of ORT and are promoting this basic treatment. Sachets of oral rehydration salts (ORS), costing no more than US$0.10, and home remedies, such as rice water, weak tea or green

coconut water, can forestall most dehydration caused by diarrhoea. Their use currently saves about 1 million lives a year. The British medical journal, *The Lancet*, described ORT as "potentially the most important medical advance of the century," and it has been estimated that in the United States alone the technology could prevent 200,000 hospital admissions for diarrhoea and save US$500 million a year.

One obstacle to the universal adoption of ORT is the attitude of the medical community itself and private doctors in particular. Egypt provides the classic example.

In 1988, the Government of Egypt, with support from USAID, launched a highly successful ORT promotion campaign. Within two years, 96 per cent of mothers with young children had heard of ORT, and the home usage rate exceeded 50 per cent. Partly as a result, the under-five mortality rate dropped by almost half, from 136 to 72 deaths per 1,000 live births between 1985 and 1991. But when external funding declined, the ORT usage rate dropped to 34 per cent, and recent surveys by WHO in two governorates indicate resistance from private medical practitioners. The surveys showed that ORT was used in only 23 per cent of child diarrhoea cases, while drugs were prescribed in 54 per cent of cases.

◆ **ANNIVERSARY:** The celebrations of the 25th anniversary of ORT, which began in October, are high on the national and regional agendas of Heads of State of SAARC, the Arab League and OAU, and will be prominent at the Ibero-American Conference of Heads of State and Government.

UNICEF/93-0700/Hiner

During a recent cholera epidemic in South America, less than 1 per cent of the victims died, thanks to community workers who distributed 3 million packets of oral rehydration salts.

In October, 37 Ministers and delegation chiefs of African, Asian and Latin American countries met in Mexico to analyse child mortality reduction globally. The meeting was held during the first National Health Week in commemoration of the 50th anniversary of Mexico's Ministry of Health. During that week, 22 million children under the age of 15 were vaccinated against measles, 7 million ORS packets were distributed, and 600,000 mothers were trained in ORT.

In 1989, Mexico launched nationwide efforts to train mothers in ORT use and child survival. These efforts were intensified in the summer of 1993. The country's goal is 80 per cent ORT coverage by 1995, and President Carlos Salinas de Gortari has placed the initiative under his personal guidance. Progress is monitored by the President's office every six months, and the media has given the effort widespread publicity. When every mother in a village has finished her training, a white flag is hoisted to signal the accomplishment. Mexico has budgeted US$20 million over three years for the control of diarrhoeal diseases (CDD), and in the first 18 months of the initiative deaths due to diarrhoea were reduced by 50 per cent in 11 states.

In November, the World Congress of Junior Chamber International (JCI) committed itself to helping meet the global mid-decade goal of 80 per cent ORT coverage by supporting missions to:

UNICEF emphasis on oral rehydration therapy to save children from the often lethal effects of diarrhoea has brought results: A quarter century after it was introduced to the world, ORT is now saving 1 million young lives a year.

UNICEF/93-1017/Press

BEST COPY AVAILABLE

advocate globally and nationally for ORT; launch an ORT communication drive; double global production of ORS; increase the number of villages distributing ORS; and transfer ORT technology to families, physicians and pharmacists. Bolivia, Brazil, India and Mexico will support these activities, and the Hong Kong chapter of JCI has offered to help China reach the goal. JCIs in Europe hope to join forces with JCI chapters in Africa.

AIDS AND CHILDREN

AIDS is increasingly becoming a disease of the young. New analysis by WHO has found that in countries where the HIV/AIDS epidemic began early, 60 per cent of those newly infected are between 15 and 24 years of age. Worldwide, WHO estimates that the number of people infected with the AIDS virus since the start of the epidemic exceeded 15 million in 1993 and that, in Africa alone, AIDS will have orphaned more than 9 million children by the end of the decade.

As the number of persons affected by HIV/AIDS increases in all regions, it has become apparent that the epidemic can only be curtailed by changes in the social conditions that fuel its spread. The experience of the past decade has made it clear that sexual behaviour conducive to the spread of HIV infection is based on attitudes that place women and young people at greatest risk — women, because they are too often unable to influence the behaviour of their partners, and young people, girls especially, because of pressures to engage in sexual activities.

During the year, the UNICEF strategy for HIV/AIDS prevention addressed the underlying factors of the epidemic in five key programme areas: youth health and development promotion; school-based interventions; sexual and reproductive health promotion; family and community care; and mass communication and mobilization. UNICEF offices in 30 countries intensified their efforts in these areas, and about half of them undertook an AIDS situation analysis for the first time.

Bangladesh, Mauritania, the Philippines, Rwanda and Uganda are sharing experiences in the area of youth health and development promotion to involve young people in the design and implementation of activities. In the Philippines, UNICEF is reaching out to street children through existing urban basic services (UBS) programmes covering health, nutrition, income generation, crisis counselling and other protective services. In Mauritania, where the prevalence of HIV/AIDS remains low, UNICEF is working with the Ministry of Public Services, Youth and Sports and with youth organizations such as the Scouts to develop a multisectoral youth programme and to analyse the situation of the nation's young people.

In Burundi, Cameroon, Thailand, Zimbabwe and the Caribbean, UNICEF is also supporting youth programmes through schools. The most advanced of these programmes is in Zimbabwe, where classroom materials focus on relationships and health, thereby placing the AIDS issue in the larger context of life skills.

In Benin, India, Madagascar and Zambia, the emphasis is on sexual and reproductive health. In Zambia, UNICEF is supporting the control of syphilis among pregnant women to reduce the risk of both HIV transmission and maternal mortality. In Colombia, where teenage pregnancy rates are high, family planning and education activities have been introduced through the health services network.

UNICEF has also increased its involvement in family and community care to help strengthen the capacity of communities to cope with the epidemic — especially the needs of children orphaned or otherwise affected by AIDS. In Thailand, this work is being reinforced through support for local NGOS. In Tanzania, UNICEF is monitoring child health, nutrition and the impact of AIDS through village committees concerned with child survival and development. In

Reaching the people: An AIDS awareness mural covers the wall of a bus shelter.

BEST COPY AVAILABLE

the Congo and Ghana, programme activities initiated in 1993 will strengthen basic health care units in the context of the Bamako Initiative.

Mass communication and mobilization have been aimed at developing a dialogue among young people through the media and other channels in Côte d'Ivoire, Egypt, Honduras, Kenya and Senegal. In Honduras, a 'Sports for Life' project encouraged 5,000 young people to take part in non-formal education activities. The Americas and Caribbean Regional Office (TACRO) of UNICEF has included AIDS in an animated film series on life skills to be distributed to schools and community groups. The series is funded from the Global Communication Support Fund (GCSF).

Coordination efforts with other United Nations agencies, NGOs and technical institutions intensified in 1993. UNICEF co-sponsored an HIV/AIDS prevention and care programme with the WHO Global Programme on AIDS, UNDP, UNESCO, UNFPA and the World Bank, and chaired the Inter-Agency Advisory Group on AIDS. A collaborative agreement was also drafted with the International Children's Centre to support the Congo, Haiti and possibly Thailand in providing family and community care.

NUTRITION

MALNUTRITION stunts the mental and physical growth of one child in three in the developing world and is a factor in one third of the 13 million child deaths each year. But it need not be that way.

In 1993, most of the world's 193 million malnourished children lived in households where there was enough to eat. Important causes of malnutrition were frequent bouts of diarrhoea and other illnesses, the bottle-feeding of infants and poor weaning practices, low birth weight, infrequent feeding and micronutrient deficiencies.

◆ FREQUENT ILLNESS: Children born into poverty and in environments without basic amenities, such as safe water and sanitation, are exposed to a wide range of illnesses that suppress their appetite, inhibit the absorption of food, burn calories and drain away nutrients during bouts of vomiting and diarrhoea. Unless those nutrients are replaced, a moderately malnourished child is three times more likely to die from exposure to disease than a child who is well nourished.

◆ BOTTLE-FEEDING: Infants who are bottle-fed are much more likely to be malnourished than those who are breastfed. Breastmilk is not only free, it also has all the nutrients a child needs and 'immunizes' infants against common diseases. Infant formula is expensive, and in poor households it is frequently overdiluted with unsafe water and fed to the child from unsterilized bottles and teats. If the child is weaned from the breast too early, the risk of disease and malnutrition increases. If weaning starts too late, growth falters.

◆ LOW BIRTH WEIGHT: Ill health and poor development often begin in the mother's womb. Poorly nourished mothers tend to give birth to underweight babies who very often lack the necessary protection or nutrition to settle into normal growth patterns.

◆ INFREQUENT FEEDING: Because young children have smaller stomachs and proportionately higher energy needs than adults, they need smaller meals five or six times a day. Ignorance of their needs can result in feeding patterns that conform to the needs of adults rather than children.

50

UNICEF/1990/Schytte

Children, who have smaller stomachs and higher energy needs than adults, require smaller and more frequent meals with a little extra fat or oil.

MICRONUTRIENTS

LACK of knowledge about micronutrients and the consequences of iodine, vitamin A or iron deficiencies in the diet can lead to stunted mental and physical development.

UNICEF continued to fight micronutrient malnutrition on several fronts during the year. It delivered vitamin and mineral supplements through government health services, assisted with the fortification of widely consumed foods, and supported education and advocacy programmes to persuade families to diversify their diets to ensure an adequate intake of micronutrients.

◆ IODINE: A global review in 1993 showed that more than 1.5 billion people live in areas where the dietary intake of iodine is inadequate and that some 655 million people have enlarged thyroid glands as a result of iodine deficiency. It appears likely that in addition to the most serious iodine deficiency disorders (IDD) — goitre and cretinism — the intellectual capacity of entire populations may be reduced by up to 10 per cent in regions where a deficiency exists.

There is a global consensus that the most effective and sustainable way of eliminating IDD is to fortify all edible salt with iodine. UNICEF has been working with a number of organizations including UNDP, WHO, the World Bank, the International Council for the Control of Iodine Deficiency Disorders (ICCIDD) and Kiwanis International to iodize all edible salt by 1995. It has helped more than 20 countries to prepare plans for meeting that objective.

China, with the greatest number of people affected by IDD, announced in August that it would aim for the iodization of its salt supplies by 1995.

In Central America, governments and the salt industry aim to have most salt supplies iodized by the end of 1994 and all supplies fortified by the end of 1995. Strong commitments to salt iodization were also made during the year by leaders in Eritrea, Ethiopia, Ghana, the Lao People's Democratic Republic, Malawi, Thailand, Viet Nam and Zimbabwe.

UNICEF supported the expansion of existing iodization programmes in Bangladesh, India, the Philippines and Tanzania with assistance for training and public education.

Just 10 years ago, more than half the populations of Bolivia and Ecuador were affected by IDD. Now, more than 80 per cent of all salt consumed in most Latin American countries is believed to be effectively iodized, and UNICEF attention is now concentrated on monitoring to ensure that all supplies are adequately fortified by the end of 1995.

UNICEF/91-0050/Murray-Lee

To combat goitre and other iodine deficiency disorders, UNICEF is assisting governments to meet the mid-decade goal of universal iodization of salt.

It now appears that many countries in South and East Asia, Latin America and Africa are making more progress against IDD than France, Germany, Italy and Spain, where iodine deficiency remains a public health problem. During the year, the UNICEF Geneva Office established a task force to assess the status of IDD and relevant legislation throughout Europe, and prepared an IDD strategy for 1994-1995.

◆ VITAMIN A: Long recognized as the leading cause of preventable childhood blindness, vitamin A deficiency (VAD) results in at least 500,000 children losing some or all of their vision every year.

Less well known is the fact that vitamin A is essential for the proper functioning of the immune system. Analysis supported by the Subcommittee on Nutrition of the United Nations Administrative Committee on Coordination indicates that an adequate intake of vitamin A reduces child mortality from all causes by 23 per cent. In Ghana, vitamin A supplements have been found to substantially reduce patient visits to hospitals and health centres.

VAD is a known serious health problem in 37 countries, where a total of 40 million preschool children do not eat enough foods containing this essential nutrient. The status of VAD needs to be estimated in many other countries where the situation has not been accurately assessed. The most seriously known affected countries are in Africa, South-East Asia and the Western Pacific. UNICEF is advocating that children under two years of age should be given vitamin A supple-

ments twice a year. Two capsules a year can protect a child for just a few cents and can be delivered at the same time as vaccinations.

UNICEF is helping communities in Ethiopia and Viet Nam to grow vitamin A-rich foods and is supporting the fortification of sugar with vitamin A in Guatemala and other Central American countries. In Guatemala, sugar is fortified for just US$0.30 per person per year. The cost is recovered by increasing the price of sugar by less than 2 per cent. Field trials in Guatemala showed that the fortification programme resulted in a threefold increase in the average daily intake of vitamin A and a reduction in vitamin A deficiency in young children. The Philippines is also studying the feasibility of food fortification with vitamin A.

◆ **IRON:** It is estimated that more than 1.5 billion people suffer from some form of anaemia, half of them as a result of iron deficiency. The worst-affected populations are in Africa and South Asia, followed by Latin America and East Asia.

One half of all anaemia occurs in pregnant women and preschool children. Iron deficiency anaemia reduces work capacity, and in developing countries severe anaemia has been blamed for up to 20 per cent of all maternal deaths. It also retards foetal growth, causes low birth weight and increases infant mortality.

During infancy and childhood, iron deficiency severely weakens cognitive ability and impairs resistance to disease. Low-cost iron tablets can prevent these problems, and UNICEF remains the major supplier of iron supplements for pregnant women in more than 30 countries. There is concern, however, that supplementation against iron deficiency anaemia is not as effective as it should be. Many pregnant women report side-effects from supplements, and UNICEF is supporting research into the feasibility of providing supplements weekly instead of daily.

◆ **WORLD SUMMIT GOAL:** The global rate of protein-energy malnutrition (PEM) declined from 42 per cent in 1975 to about 36 per cent in 1992, and the World Summit goal is to halve severe and moderate malnutrition among children under five by the year 2000.

Although malnutrition rates have declined in most regions, nutrition performance varies markedly between and within regions. The incidence of malnutrition in South Asia is twice that of Africa — but while its prevalence in South Asia (60 per cent) has declined in recent decades, its grip in sub-Saharan Africa (31 per cent) has not eased in 15 years. Although it was possible with the assistance of UNICEF and other agencies to avoid widespread famine in eastern and southern Africa during the severe 1992–1993 drought, serious nutritional emergencies persisted in a number of countries including Angola, Burundi, Rwanda, Somalia, the Sudan and Zaire.

Twenty-four countries* have adopted the UNICEF strategy to fight malnutrition by: empowering communities to deal with their own nutrition problems; protecting, promoting and supporting breastfeeding and appropriate child-feeding practices; improving nutrition information systems; and helping countries to arrive at a consensus as to the causes of malnutrition. Efforts to fight malnutrition are often complicated by the failure of communities and policy makers to recognize that food supply is only one facet of the problem and by the fact that only 1 or 2 per cent of the victims appear to be malnourished. Stunted mental and physical growth can pass unnoticed in communities unless children's progress is measured against charts that show how tall or heavy they should be for their age.

More than 200 UNICEF field staff have been trained in the principles of the nutrition strategy. In Bangladesh, Ghana, Nigeria and Viet Nam, UNICEF is working with other agencies including the World Bank to help governments reorient their approaches. And in Bangladesh, Bolivia, Ghana, India, Pakistan, Tanzania and Viet Nam, the organization has supported strategy training for government staff.

Supplementary feeding programmes are one way in which UNICEF fights malnutrition in emergency situations.

UNICEF/1995/Thomas

Large-scale nutrition programmes in countries such as India and Tanzania have convincingly demonstrated that endemic malnutrition can be overcome. Between 1984 and 1987, Tanzania's community-based Iringa nutrition programme more than halved the rate of severe malnutrition among children and made substantial inroads on moderate malnutrition as well. The programme was initiated under the UNICEF/WHO Joint Nutrition Support Programme in a time of economic crisis, but by helping villagers identify the main causes of malnutrition and involving them in the solutions, it was possible to bring down the cost of the programme from US$16 per child to about US$2.50 and take the initiative nationwide.

The causes of malnutrition in Iringa (population 1 million) were traced to inadequate food intake and poor child care, resulting largely from the fact that village women were so overburdened by their daily chores that they lacked the time to prepare nutritious meals and bring their children to health centres for check-ups and treatment. Once they recognized the problem, communities rostered men and boys to gather the firewood. Fuel-efficient stoves were introduced and credit agencies were established to purchase agricultural machinery and boost crop yields. Hand-operated mills were also introduced to reduce the time women spent pounding grain. As a result children were fed a richer, more digestible gruel made from flour. More than half the districts in mainland Tanzania and Zanzibar have followed the Iringa example, and the Government plans to have similar programmes operational throughout the country by 1995.

◆ **HOUSEHOLD FOOD SECURITY:** Sub-Saharan Africa remains the major focus of UNICEF-assisted food security activities, which have been most successful when they improve women's access to household resources. UNICEF partners in this field include FAO, the International Fund for Agricultural Development (IFAD), the World Bank (in Ghana, Nigeria and Uganda), the Consultative Group on International Agricultural Research and some bilateral agencies. A new partnership with the US-based NGO Freedom from Hunger provided credit and education for women in Burkina Faso and Ghana. The programme in Burkina Faso was launched with a few hundred women and had reached more than 1,000 by the end of the year. In Namibia, UNICEF supported the development of income-earning opportunities for women and worked with the Ministry of Agriculture to retrain agricultural extension agents, who had in the past ignored the needs of small farmers in general and women in particular. The objective of retraining extension agents has been to shift the focus of agricultural support from large commercial operations to rural women farmers.

UNICEF/5641/Hartley

UNICEF helps to maintain household food security in situations where social upheaval has disrupted normal living conditions.

* Bangladesh, Bolivia, Brazil, Burkina Faso, Chad, Ecuador, Egypt, Ethiopia, India, Indonesia, Madagascar, Malawi, Mali, Mozambique, Namibia, Nepal, Niger, Nigeria, Peru, the Philippines, Sri Lanka, Swaziland, Tanzania and Viet Nam.

BREASTFEEDING

SUPPORT for breastfeeding accelerated dramatically in 1993.

The number of countries participating in the baby-friendly hospital initiative (BFHI) almost doubled from 90 in 1992 to 171 in 1993, while the number of baby-friendly hospitals more than tripled from 377 to 1,274 over the same period. Some 10,000 hospitals and maternity facilities, including 230 in industrialized countries, have made public commitments to achieve baby-friendly status by the end of 1995.

To achieve this status, hospitals and maternity facilities must implement the 10 measures supporting breastfeeding, outlined by WHO and UNICEF, and stop the distribution of free and low-cost supplies of breastmilk substitutes. When they have satisfied these WHO/UNICEF standards they are awarded a baby-friendly plaque that publicly identifies them as institutions practising internationally recommended modern health care.

The World Summit for Children goal is that by the year 2000 all women should be empow-

BEST COPY AVAILABLE

UNICEF/5565/Hanley

The baby-friendly hospital initiative aims to reverse the trend towards bottle-feeding.

ered to practise exclusive breastfeeding and all infants should be fed exclusively on breastmilk from birth to four to six months of age. Thereafter, children should continue to be breastfed, while receiving appropriate and adequate complementary foods, up to two years of age or beyond.

It is estimated that currently only 25 per cent of the world's infants breastfeed exclusively for the first four months — thereby receiving protection against the diarrhoeal diseases, ARI and other illnesses associated with inadequate child nutrition. Medical evidence shows that if mothers were enabled to exclusively breastfeed their babies during the first six months of life, the incidence of life-threatening childhood and maternal diseases, including breast cancer, would decrease. It is estimated that if more infants were breastfed exclusively as recommended, an additional 1.5 million infant deaths, caused each year by diarrhoea and ARI alone, would be prevented.

◆ **OBSTACLES TO BREASTFEEDING:** The broad strategy of BFHI is to minimize and, where possible, eliminate the obstacles that societies have placed in the way of successful breastfeeding. Those obstacles include: work environments that require the separation of mothers from their infants for long periods; maternity care practices that interfere with the biological processes for establishing lactation; beliefs and practices such as the introduction of water or other fluids to the feeding regimen; and marketing strategies by manufacturers and distributors of breastmilk substitutes. All contribute to a cycle of misinformation to the public, to health workers, and to parents and mothers especially, and ultimately influence a mother's decision on how to feed her infant.

In less than three years, BFHI has demonstrated that changes in practices and attitudes in prominent hospitals can contribute greatly to actions that can eventually reverse the erosion of breastfeeding. Within six months of adopting BFHI at the Union Medical College Hospital in Beijing, the proportion of mothers breastfeeding their children increased from 23 per cent to 85 per cent.

Experience has also shown that the introduction of baby-friendly practices can save money as well as lives. At José Fabella Memorial Hospital in Manila, a 700-bed maternity facility in the Philippines, administrators estimate that within one year of becoming baby-friendly they had saved more than US$100,000 in terms of the salaries of nursing staff, the space that had been used for a nursery and money to pay for feeding bottles and formula.

In China and the Philippines, a number of hospitals have extended the influence of BFHI by inviting health workers and midwives in the surrounding area to attend training courses.

BFHI is also becoming a conduit for add-on services. In Uganda, polio and BCG vaccinations are given before mother and infant are discharged from maternity facilities.

◆ **BFHI-PLUS:** Most countries in West Africa have adopted a BFHI-plus strategy that integrates the initiative with other health care, and some have made BFHI a part of their NPAs. In Burkina Faso and Namibia, mother/baby-friendly initiatives include modern obstetric care. Myanmar is working with traditional midwives on a 'baby-friendly home delivery programme' because the majority of mothers still give birth at home.

◆ **PUBLICATIONS:** The UNICEF newsletter, *BFHI News*, continued to be an important source of information for advocates globally. The newsletter is published in English, Portuguese and Spanish, and its English subscriber list more than doubled from 3,500 to 8,200 in 1993. More important, field offices, National Committees and other subscribers photocopy the newsletter and multiply its circulation. The country office in India, for example, runs off 5,000 copies of each issue for national distribution.

◆ FIGHTING MISINFORMATION: UNICEF and WHO continued to develop lactation training manuals to counter misinformation on breastfeeding and, since the launch of BFHI in June 1991, have trained hundreds of trainers to expand the initiative country by country and hospital by hospital. During the year, UNICEF organized four regional training courses and distributed written and audiovisual materials for training and advocacy work. WHO continued to organize regional workshops to guide experts in the preparation of legislation as well as implementation and monitoring of the International Code of Marketing of Breastmilk Substitutes.

◆ BOTTLE-FEEDING CULTURE: An entrenched bottle-feeding culture in several countries, including Japan and the United States, threatens the June 1994 goal of ending the supply of free and low-cost breastmilk substitutes through health facilities in the industrialized countries. By the end of the year, more than 200 hospitals in the industrialized world were pursuing baby-friendly status, but only 11 industrialized countries had taken some action to end distribution of free or low-cost breastmilk substitutes. Action ranged from government prohibition to voluntary agreements with manufacturers and distributors.

Progress elsewhere during the year was more encouraging. Of 72 developing countries where free and low-cost distribution was the norm, all but two, Kuwait and Senegal, had taken government action to end the practice. Another 52 developing countries, where breastmilk substitutes have not taken hold, were encouraged to take preventive action. In a number of other countries, including Mozambique, Viet Nam and the newly independent States of Central and Eastern Europe, supplies of breastmilk substitutes have not been readily available, but there was evidence of increased efforts to market them.

◆ LOOPHOLES: Although formal monitoring systems are still being established, informal reporting from 34 UNICEF country offices during the year indicated that the distribution of breastmilk substitutes continued in 20 countries despite government action to prohibit it. Among those countries were Brazil, China, Indonesia, Malaysia, Pakistan and Thailand.

◆ PARTNERS: UNICEF and WHO held three meetings during the year with international organizations of health professionals and NGO promoters of breastfeeding to develop common BFHI strategies and materials. UNICEF worked with Wellstart International on a video series to support breastfeeding for working women in different cultural and work environments, and continued to work closely with Public Interest International and other NGO partners including the International Baby Food Action Network (IFBAN), La Leche League International (LLLI), the International Code Documentation Centre, the International Lactation Consultant Organization, and the World Alliance for Breastfeeding Action (WABA).

WABA is the coordinating 'umbrella' for efforts supporting the Innocenti Declaration on the Protection, Promotion and Support of Breastfeeding, and it worked with UNICEF once again in 1993 on the promotion of World Breastfeeding Week, observed in August each year. The focus of the Week, in more than 100 countries, was on mother-friendly workplaces.

Support from WABA included the production and distribution of an action kit, and UNICEF presented 'Mother-Friendly Workplace' awards to businesses with policies that empowered working women to breastfeed. The WHO Director-General and the UNICEF Executive Director issued statements encouraging government, NGO and public support for imaginative legislation to protect the rights of women who choose to return to work and continue breastfeeding.

◆ MEDIA SUPPORT: UNICEF also developed a multimedia BFHI advertising campaign in English, French and Spanish and continued to attract print and broadcast coverage in major international newspapers and magazines including the international editions of *Newsweek*, *Time* and the *International Herald Tribune*.

Allowing mother and newborn to stay together in the maternity facility is an important first step towards successful breastfeeding.

UNICEF/6681/Lemoyne

SAFE MOTHERHOOD AND FAMILY PLANNING

IF women could choose how many children to have, the rate of population growth in the developing world would fall by about 30 per cent, and maternal mortality would be reduced substantially. Almost one third of the pregnant women interviewed for the World Fertility Survey stated that they would have preferred not to have another baby. The fact remains, however, that in 1993 about 120 million women of child-bearing age in the developing world had no effective means of avoiding further pregnancies.

Underscoring this lack of control over fertility is the fact that some 500,000 women die every year from causes related to pregnancy and childbirth. And for every one of these deaths another 15–20 women suffer some form of lifelong pregnancy-related disability.

More than 25 per cent of maternal deaths are due to abortions and another 25 per cent to complications that are common in ill-timed, high-risk pregnancies. If women had access to obstetric care, if couples spaced births adequately, and if women who did not want to have a baby could avoid pregnancy safely and effectively, many of those deaths would be prevented.

◆ GOALS: The 1990 World Summit set important goals for safe motherhood and family planning, including: a 50 per cent reduction in maternal mortality by the year 2000; access by all pregnant women to prenatal care, trained attendants during childbirth and referral facilities for high-risk pregnancies and obstetric emergencies; and access by all couples, especially women, to family planning services in order to avoid pregnancies that pose health risks to the mother or child.

◆ FAMILY PLANNING: At its 1993 session, the UNICEF Executive Board reviewed its policies relating to family planning, and field offices were encouraged to enhance their cooperation with UNFPA, WHO and relevant NGOs. The International Conference on Population and Development (Cairo, 5–13 September 1994) will provide a major opportunity to focus global attention on family planning and the central role of child survival and birth spacing in family planning activities.

UNICEF supports the broad objectives of family planning through efforts to improve the status of women, through support for breastfeeding, basic education and literacy, and through advocacy and social mobilization.

◆ STATUS OF WOMEN: A woman's level of education and her ability to earn income often determine the way society and her family regard her. Social data from all regions have consistently shown that when women are empowered with education, training, and access to credit, health care and other basic services, the well-being of their children improves and birth rates decline. UNICEF efforts in these areas start with girls, and 10 of the 27 goals endorsed by the World Summit for Children call for special attention to the needs of girls and women.

◆ BREASTFEEDING: Although breastfeeding is not a wholly reliable method for preventing conception, it does have a major influence on the interval between births. In Asia and Africa, it is believed that breastfeeding averts an average of four potential births per women. One major way in which UNICEF supports breastfeeding is through the UNICEF/WHO baby-friendly hospital initiative (BFHI). Family planning counselling in the immediate post-partum period is emerging as a priority in MCH and safe motherhood activities (*see also 'Breastfeeding'*).

◆ BASIC EDUCATION AND LITERACY: Education helps to raise the social status and self-image of all human beings and makes them more

Children need love and attention from both mother and father.

UNICEF/HQ93/Pirozzi

receptive to important new ideas for social progress. Women who have attended school are more likely to reject harmful traditional practices, to seek and use health services, and to see the need for family planning. Women with more schooling tend to marry later and to delay pregnancy and child-bearing. Research indicates that women with no schooling have almost twice as many children, on average, as those who have attended school for seven years or more.

◆ COMMUNICATION: One of the remarkable social changes of the past 10–15 years is the expressed desire in many developing countries for fewer children. The preferred family size fell from 4.5 children in the 1970s to 3.5 children in the 1980s. Advocacy and social mobilization are well recognized among the special strengths of UNICEF, and effective information, education and communication could help translate the desire for fewer children into reality.

UNICEF usually supports family planning services as an integral part of each country's MCH services and includes education and counselling, management information systems, training and logistical support for the delivery of services. UNICEF does not advocate any particular method of family planning and does not provide contraceptives. Nor does it support abortion as a method of contraception. When governments ask for assistance with family planning services, UNICEF works closely with UNFPA, WHO and other agencies, in accordance with the comparative strengths of each.

◆ SAFE MOTHERHOOD: A joint effort by UNDP, UNICEF, WHO, the World Bank and the Population Council, this initiative aims to provide women throughout the developing world with pre- and postnatal care, safe delivery services, including early detection of pregnancy-related complications and emergency care, and protection against HIV and other sexually transmitted diseases. Improved health and nutrition for women and promotion of family planning and child spacing are the integral elements of UNICEF actions in this area. The NGO Family Care International is serving as the inter-agency secretariat for the safe motherhood initiative.

In many developing countries, particularly in Africa and South Asia, communities depend on traditional birth attendants (TBAs) for prenatal and delivery services. During the year, UNICEF continued to support training for TBAs in accordance with guidelines worked out with UNFPA and WHO. Special efforts are being made to help raise the quality of services provided by TBAs.

UNICEF/A480/D'Urso

UNICEF supports training programmes to upgrade the skills of traditional birth attendants, on whose expertise many of the developing world's mothers depend.

◆ COUNTRY ACTIVITIES: UNICEF continued to help governments in their efforts to increase the numbers of pregnant women who receive prenatal and birth care from skilled nurse-midwives, who can detect early signs of complications and can arrange transportation to appropriate emergency obstetric facilities. UNICEF also focuses on TBA training and the mobilization of communities to provide emergency transportation and increasing access to safe blood transfusions and obstetric care through PHC systems.

UNICEF supplied iron and folic acid supplements for prenatal clinics and hospitals, and chloroquine, where appropriate, for malaria prophylaxis for pregnant women. Safe motherhood training for UNICEF staff also continued in 1993.

In India, UNICEF remained a principal supporter of the Government's child survival and safe motherhood programme, providing technical, material and training support to develop referral strategies and expand access to emergency obstetric care.

In Benin, Colombia, Madagascar, Myanmar and Zambia, UNICEF initiated programming in sexual and reproductive health, with an emphasis on improved health care services and better linkages between community organizations and health service providers.

In Chile, Mali, Mauritania, Morocco, the Philippines, Rwanda and Uganda, the organization helped strengthen the capacity of youth groups to address the health needs of young people. In Barbados, Burundi, Cameroon, Sri Lanka and Zimbabwe, school curricula dealing with responsible sexual behaviour, reproduction and family planning were introduced or strengthened.

THE SMALLEST DEMOCRACY AT THE HEART OF SOCIETY

A family can be many things. It can be a source of love and support and the foundation for all that is good in society. But it can also be a dictatorship, a patriarchy, a matriarchy, a commonwealth, a cooperative or a limited partnership.

Whatever form the family takes, young children never have equal power with their parents, and it is quite rare for a wife to have the same power as her husband. Economic and social pressures are changing the basic forms and functions of families, but in far too many cases they remain the setting for deeply entrenched inequality between men and women, and for discrimination and violence against women and children.

The development of a partnership between men and women based on equal rights and responsibilities is the most fundamental challenge for families in rich nations as well as poor. The essential elements of that partnership are gender equality in the household, equal sharing of family responsibilities and equal social and economic opportunities for women. Without them, families and society as a whole cannot hope to develop to their full potential.

All UNICEF programmes for child survival, development and protection are directed towards the needs of children and women, and helping parents to succeed with the multiple challenges of family life.

The International Year of the Family (IYF), however, has provided an opportunity to sharpen the focus of public attention on families with special challenges and those in crisis. Among them: refugee families; families in poverty; families headed by women; informal families of children living together on the streets of cities in the developing world; and families in industrialized countries, where emotional stress can be as devastating as economic hardship.

In preparing for IYF (1994), UNICEF country offices were asked to document programmes that directly strengthen the capacity of families to meet their children's social and emotional needs and to collaborate in the preparation of activities supporting the Year. Their responses highlighted the diversity of UNICEF assistance.

In Liberia, UNICEF is helping to reunite families torn apart by the civil war. In Namibia, a family life empowerment programme supports the needs of children and women in especially difficult circumstances.

In Costa Rica, Ecuador and the Philippines, programmes involve parents and older siblings in early childhood education. In China, a project enlists grandparents for child care and community education.

In Mozambique and Viet Nam, efforts to increase household food production are targeted on all adult family members. Alternative non-institutional care is being developed for abandoned and destitute children in Chile, Costa Rica, Ecuador and India.

In Swaziland, 'The Family' was the national theme for the Day of the African Child in June. It was also the theme for a meeting of First Ladies in Costa Rica (6–9 September).

UNICEF and four other UN agencies supported a global project to study selected families in 12 countries for a book to be published in 1994.

UNICEF worked with the UN Department of Public Information to produce an IYF information kit and film, collaborated with the Population Council on a publication to highlight the policy implications of changing family structures and supported the preparation of another publication entitled *Women and the Family*.

The Deputy Executive Director, Programmes, was a main speaker at the launching of IYF with over 1,000 NGO representatives in Valletta on 1 December, and UNICEF will play a key supporting role in global celebrations of the International Day of the Family on 15 May 1994.

Efforts were made throughout 1993 to ensure that IYF has a life beyond 1994, through special support activities and through the integration of IYF into UNICEF programmes.

UNICEF/93-0728/Haines

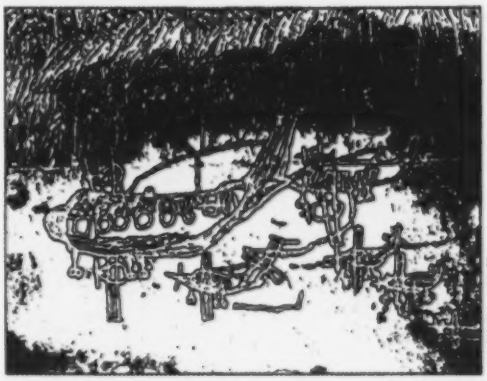
CHILDREN IN ESPECIALLY DIFFICULT CIRCUMSTANCES

WAR, poverty and endemic exploitation cast a pall over the lives of many millions of children in developing and industrialized societies in 1993. Although UNICEF, the NGO community and other champions of children's rights continued to gain public and political leverage for the Convention on the Rights of the Child, the breadth and scale of violence against children at home, in the streets and in workplaces was appalling.

Children and women made up the vast majority of the victims of wars and civil conflicts that raged this year in Africa, Asia, Central and Eastern Europe and Latin America. In some of these conflicts, children were forced to carry weapons and to kill. Humanitarian responses to the trauma and suffering of those who survived the experience has only begun to scratch the surface of their needs.

Less dramatically exposed, but also at risk during the year, were the 100 million boys and girls who the International Labour Organisation (ILO) estimates are working to support themselves and help their families. Many of these children are sold into prostitution or bondage to their employers, and some are physically or mentally disabled by the confined and hazardous working conditions. Indeed, their lives may be threatened.

The year was not without progress, however. Proposed legislation to ban the import of goods made with child labour brought the plight of working children into sharp public focus in 1993. A number of export industries in South Asia moved to protect their European and North American markets for rugs and garments by giving assurances that they would comply with the buyers' stipulation, but the move was a shock for many poor families that have traditionally drawn income from children as well as adults. Concern was expressed that while protecting some children, this development might also result in the placement of the newly unemployed children in occupations that are even more hazardous to their health.



UNICEF/93-0651/Ekner

A young boy's chalk drawing on the mud walls of a United Nations compound illustrates his hopeful dream: it shows relief airplanes ferrying supplies to his village.

UNICEF/93-0014/Murray-Lee

Widespread poverty forces many young children to work long hours for low wages to help their families survive.

AFRICA

At risk on the streets

On a sandy residential street near the town centre in Ougadougou, street child-turned-businessman Marcel Tabouré has set up a table, two wooden stools and a broken chair under the shade of a black tarpaulin. A heap of shoes for repair and four young assistants, busy with boot rags and brushes, testify to a wise business decision three years ago.

At that time, Marcel, who had left his village and family for the possibilities and uncertainties of the Burkina Faso capital, was homeless, hustling between the market-place and the train station with boot rags and polish. He might have grown old doing much the same thing, but Marcel met Grégoire Zongo.

Grégoire, who works for a local NGO called Action Educative en Milieu Ouvert (AEMO), directed Marcel to a nearby community centre, established by AEMO in 1990. In May 1993, UNICEF committed to make repairs to the building and provide play and teaching equipment, soap and first-aid supplies.

Marcel expected to take a shower there, wash his clothes and play table tennis; instead he found an opportunity to change his life. He was told that if he learned a trade at the centre, such as shoe repair or carpentry, he could qualify for a small loan to establish a business. Marcel decided on shoe repair. Three years later, with an established clientele, he has paid back his loan, fine-tuned his business with Grégoire's help, and rented a room that he calls home.

Marcel Tabouré is one of the lucky few. In Burkina Faso, as in many countries in Africa, the numbers of children struggling on the streets far outstrip the resources available to help them. The AEMO centre where Marcel found help, and another like it, run by the NGO Aide à Toute Détresse — Quart Monde (ATD — Fourth World), can accommodate fewer than 200 of the 2,000 children living on the streets of the capital.

Children living on the street, whether in Benin, Ethiopia, Mozambique, Namibia, Zambia, Zimbabwe or other African countries, have strikingly similar profiles, according to a recent paper on Africa's children prepared by OAU and UNICEF.

UNICEF/Scott

"Their street employment, like that of other child workers, is almost always the result of the need to participate in their families' daily survival. Evidence from all recent studies of street children in Africa shows that they almost always live with their families and work within local laws and customs," the paper points out.

Across a continent facing a calamitous economic decline, children are increasingly drawn into the struggle for subsistence. In Bangui, the capital of the Central African Republic, the street child population is estimated at 2,000 to 3,000. In Khartoum, between 5,000 and 20,000 boys are believed to be on the streets. Children "on and of the street could easily represent some 10 to 20 per cent of Africa's urban child population," according to OAU.

The Undugu Society, an NGO that works with Kenyan street children, estimates that 25,000 children were living on the streets in 1992 and that this population is growing at a rate of 10 per cent a year. Seeing education as key in helping children escape the exploitation and poverty that trap them on the street, Undugu runs four slum community schools, which offer a condensed primary curriculum followed by a year of vocational training, and five schools for children who make their living by selling scrap, with numeracy as the focus.

These small but significant solutions to a large and growing problem are not isolated examples. Governments are addressing the issue as part of their approach to the cross-cutting concerns of AIDS and children in especially difficult circumstances, while NGOs and organizations such as UNICEF continue to offer children, like Marcel Tabouré, ways to escape from the turbulent and dangerous streets.

The 1992 annual SAARC conference called for the progressive elimination of child labour by the end of the decade, and UNICEF is working with all parties including ILO to find innovative ways of responding to the situation and monitoring it.

◆ STREET CHILDREN AND WORK: The UNICEF International Child Development Centre held a global seminar on Street and Working Children in Florence from 15 to 25 February. Its guiding principles were the 1973 ILO Convention, which sets the minimum age for work at 15, and the 1989 Convention on the Rights of the Child, which contains seven articles related to the protection of children from exploitation, neglect and any other abuses they might encounter in a work environment. The objective of the seminar was to sharpen the participants' programming and project management skills on behalf of street and working children.

It was noted, among other things, that millions of children still grow up in environments where the distinction between 'helping' their parents, 'preparation for adult life' and 'child labour' are blurred. ILO does, however, make a distinction between children who are working in socially and personally useful ways for pocket money, or to help the family business during school holidays, and children whose working conditions should be regulated or eliminated. Working children at risk are those who are prematurely leading adult lives and working long hours for low wages under conditions that are damaging to their health and to their physical and mental development. Participants in the seminar considered this distinction to be especially helpful in the context of street children, some of whom it was noted, were clearly "at risk."

It was also noted, however, that existing data did not reflect the "invisible child workforce." Participants observed that although the street was a hazardous working environment, the problems there were at least visible and had raised the public profile of street children. Even less fortunate were the millions of young children in domestic employment or serving in back-room workshops, bars and brothels. There, the abuses they suffered continued indefinitely behind closed doors — "doors which few employers or government officials wish to prise open."

◆ ABUSE AND NEGLECT: UNICEF continued to support regional and international NGOS actively working for the cause of abused and neglected children, placing its emphasis on prevention and rehabilitation. The problem is a complex one that is rooted in many of the structural problems facing societies today, including poverty, inequality, unemployment, conflict within families and inadequate social services such as education and counselling.

Child abuse is a problem shared by industrialized countries where parental and other abuse in the home is considered to be much more widespread than previously thought, often going unreported until the victims are almost adults and able to break free.

◆ CHILDREN IN ARMED CONFLICT: One irony of the post-cold war era is that the number of children affected by armed conflict is actually increasing. UNICEF remained active in many countries, focusing on rehabilitation and other support for children who have been physically disabled or emotionally traumatized by their experiences. UNICEF estimates that 6,000 children fought in Liberia's four-year-long civil war and is supporting a project to rehabilitate as many of them as possible.

UNICEF was also involved in efforts during the year to reunite unaccompanied child victims of conflict with their families. In Eritrea, 50 per cent of returnees during the year were children, and the numbers of those in especially difficult circumstances continued to rise. There were also reports from Chad in 1993 that in 40 per cent of households the children had become separated from their families during outbreaks of violence.

UNICEF organized in New York (1–3 November) the first global workshop on psychosocial programmes for children in situations of armed conflict. It was attended by UNICEF programme officers from 16 countries, including former Yugoslavia, together with key national counterparts and consultants with experience in these countries. They reported that analyses of the

UNICEF/51149/Isaac

In a 'week of tranquillity' in a conflict zone, UNICEF reached more than 200,000 children with food, clothing, blankets and medicines. These two children stand mutely beside a bullet-riddled car.

extent and nature of assistance needed had already been undertaken in El Salvador, Sierra Leone and the Sudan and that assessments of the Education for Peace programme were under way in Lebanon and Nicaragua. Professionals and paraprofessionals were trained for peace education in Liberia and Serbia, programme implementation was monitored in Guatemala, Mozambique and Peru, and the impact of Education for Peace was evaluated in the Philippines and Sri Lanka.

Education for Peace projects took many forms in 1993, all promoting the knowledge, skills and attitudes children need for creating a more peaceful future. There were summer camps and day camps in Lebanon, the Kukatonon Children's Peace Theatre in Liberia, a travelling circus of trainers in Mozambique, conflict resolution lessons in Sri Lankan schools and an educational radio programme for children in Sarajevo. Education for Peace was a special focus of the UNICEF Education for Development Section, which responded to requests for training, curriculum planning and programme strategy from Central and Eastern Europe, the Caribbean region and the many industrialized countries now struggling to counter growing ethnic hatred.

A media round-table discussion on children in war and the UNICEF concept of children as a 'zone of peace' was held in London in mid-November to mark the publication of *Between the Guns: Children as a Zone of Peace*, written by the late Tarzie Vittachi. An exhibit on children and war entitled 'No War Anymore' was mounted at the Palais des Nations during the Bosnia and Herzegovina peace negotiations in Geneva and at the World Conference on Human Rights in Vienna. All received substantial media coverage.

During the year, commercial publishers worldwide made commitments to produce *I dream of peace*, an 80-page full-colour book of drawings and writings by children of former Yugoslavia. The images, poems and letters that comprise the book were created during 1992 and 1993 by children from schools and refugee camps on all sides of the conflict, as part of UNICEF's psychosocial programme for war-traumatized children in former Yugoslavia *(see box in 'Tools for advocacy' section)*.

UNICEF also worked with the office in former Yugoslavia to assess the possibility of launching a programme of education for tolerance for children and youth and to determine the most appropriate media to promote tolerance among the various communities.

CHILDHOOD DISABILITY

By the end of 1993, some 56 developing countries had included assistance for the treatment and prevention of childhood disability in their NPAs. They aim to improve services to prevent disability; detect disabilities early to facilitate community-based rehabilitation; raise public awareness of the special needs of disabled children; provide education, health and recreation services for the disabled; and legislate to protect the rights of disabled children to full integration in all aspects of community life, including equal access to services.

A number of other countries, such as Albania, Indonesia, Kazakhstan, Kyrgyzstan, Mozambique, Nicaragua, Romania, Solomon Islands, Tajikistan, Turkmenistan and Uzbekistan, also had programmes in childhood disability or planning services for disabled children in 1993.

One of the main issues in the five Central Asian republics was the plight of disabled children, some with mild mental retardation or epilepsy, who have been unnecessarily institu-

A young girl who lost her leg in a land-mine explosion learns to walk with crutches. It is estimated that the world already has one land-mine for every 20 children.

tionalized. The republics intend to establish criteria to prevent unnecessary institutionalization, draw public attention to the situation of disabled children in institutions, and promote family-based alternatives and the integration of disabled children into local schools and communities.

In Mozambique, UNICEF assisted the Government and a national NGO, ADEMO, in establishing a physical rehabilitation unit for children with disabilities, many of them caused by land-mines *(see box in 'Emergencies' section)*. About 5,000 disabled children took part in Mozambique's Third Sporting Games, organized by UNICEF and ADEMO in six provinces, and a disabled journalist covered the events for the country's radio and television stations.

A 10-year review of childhood disability initiatives in Central America was undertaken during the year in Belize, Costa Rica, El Salvador, Guatemala, Honduras, Nicaragua and Panama. It confirmed that health and education agencies and local communities could be effectively mobilized to support initiatives for the disabled, existing programmes could be expanded without a significant increase in spending, and family and community involvement was a vital source of programme support. UNICEF offices played a key role in establishing sustainable programmes for the disabled by working closely with governments, sister agencies and local communities.

Other UNICEF activities during the year included the production and distribution of UNICEF programme guidelines on childhood disability in Arabic; the preparation of instructional materials for a two-day training workshop for UNICEF staff on matters related to children in armed conflict; participation in the first North American Conference of Rehabilitation International (Atlanta, 25–29 October); and a WHO consultation on rehabilitation and prosthetics (Geneva, 2–3 November).

UNICEF/4770/Sprague

Two youngsters get personal attention from a social worker. UNICEF works closely with governments to establish sustainable programmes for the disabled.

SUSTAINABLE DEVELOPMENT — THE ENVIRONMENT

THE deadly combination of poverty, population growth and environmental degradation is threatening much of the developing world. One billion people now live in absolute poverty, many in fragile rural ecosystems and ill-serviced urban slums.

In the large majority of developing countries, population growth rates far exceed both economic growth rates and the expansion of government budgets for basic services. Moreover, the needs of the poorest are rarely viewed as pressing priorities by governments.

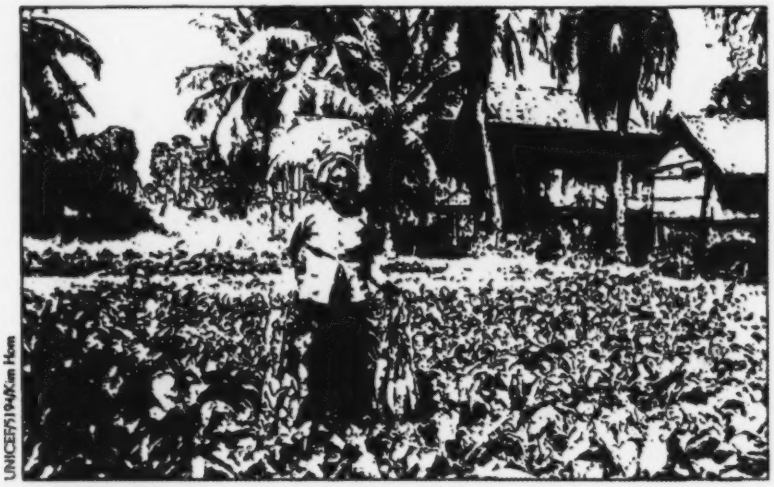
Yet, against this backdrop a number of successes have been achieved, with communities taking steps to protect both their children and the environment, while at the same time loosening poverty's grip. Such initiatives were reflected in numerous country programmes in 1993.

Emphasis was put on primary environmental care (PEC) and environmental education in the Amazon region (Bolivia, Brazil, Colombia,

UNICEF/D-0640/Press

Raising sorghum, a food staple, provides women with both income and food for their families.

BEST COPY AVAILABLE



UNICEF/91942/Kim Hom

UNICEF-supported family food projects encourage people to grow vegetables that feed the community rather than cash crops for export.

Guyana, Peru, Suriname and Venezuela); drought-stricken eastern and southern Africa (Botswana, Ethiopia, Kenya, Madagascar, Tanzania and Zimbabwe); and the Sahel (Guinea-Bissau, Mauritania and Niger). Growing concern over the deadly nexus of environmental problems and poverty was also evident in the country programmes of Chile, Colombia, Egypt, Pakistan, Senegal and Thailand.

In semi-arid Botswana, a new 'drought-proof' enterprise has emerged as a hedge against crop and livestock losses. A local NGO, Thusano Lefatsheng ('Help of the Country') is mobilizing efforts to harvest and process indigenous crops. Research into the indigenous plants of Botswana's veld has already yielded a variety of products, including the Kalahari Devil's Claw — a well-known local remedy for hypertension and rheumatoid arthritis; jam and beer made from morula fruit, which is high in vitamin C; oil extracted from morula kernels; protein-rich butter, oil and livestock feed from *morama* tubers, a staple of Kalahari Bushmen; and various herbs used to make 'bush' tea.

The harvesting and processing activities have generated employment — and thus reliable cash incomes during slack agricultural periods — for about 1,700 people, 70 per cent of them women, in three of Botswana's districts. Initial funding came from HIVOS (an NGO based in the Netherlands). In 1990, UNICEF supported research and development to boost production, and with further support for 1993–1994 from the Norwegian Agency for Development (NORAD) and UNICEF, the project is being expanded.

In the Philippines, UNICEF continued its support for intensive vegetable gardening in villages and schools of Negros Occidental, a poor rural province devastated by malnutrition in the mid-1980s, when 250,000 sugar workers lost their jobs as sugar prices plummeted. A family food production programme, in which small plots are cultivated using natural pesticides, indigenous seeds and organic fertilizers, has succeeded in reducing the rate of malnutrition among children from 40 to 25 per cent. The programme has grown to respond to other family needs — for livestock and fish-ponds, for example — and also has soil fertility and environmental conservation on its long-term agenda.

In Bangladesh, UNICEF continued to work with the Department of Public Health Engineering to provide low-cost WATSAN systems for poor communities. The expansion in services is dramatic. The number of families using latrines increased from 4 to 26 per cent between 1985 and 1991, as the provision of each tube-well was tied to the construction of 10 latrines by the community. Health benefits have already accrued. A study has found that the increase in WATSAN coverage combined with hygiene education has helped reduce the incidence of diarrhoea by 25 per cent.

The number of *thanas* (districts) covered by the project has expanded from 2 to 250, and it is hoped the effort will reach all 460 *thanas* by 1995. The current UNICEF WATSAN programme for Bangladesh (1992–1995) is also making a special effort to provide sanitary latrines and safe water supplies for 1,200 unserviced primary schools by mid-decade.

In Mauritania, the 'Greenbelt' project is helping some communities halt the advancing sand-dunes that threaten wells and other basic infrastructure in more than 80 per cent of villages in certain areas. The project has brought respite to the village of Lewreia, where every week men, women and children fought an arduous and losing battle to clear sand from the community's only well, carrying it back into the desert on basket-laden camels and in carts.

The village was contemplating drastic and expensive measures to protect their water source when they heard about the success a community on the outskirts of the capital, Nouakchott, had achieved in stemming the desert's advance by creating a green belt. Lewreia enlisted UNICEF assistance through a village health post operating under the Bamako Initiative. UNDP provided seedlings, agricultural implements and fencing wire, UNICEF transported it to the village and supervised the villagers' labours, and a French NGO introduced a windmill to irrigate the newly planted green belt and vegetable gardens.

Within a year, the sand-dunes had been stabilized, and it was no longer necessary to spend time on sand removal. Villagers from Lewreia are now being enlisted as supervisors for similar projects in neighbouring communities.

◆ ADVOCACY: The environment and development messages of the United Nations Earth Summit (Rio de Janeiro, 1992) were carried into 1993 through several new initiatives. UNDP, the United Nations Environment Programme (UNEP), UNESCO and UNICEF supported the publication of a lively 96-page book entitled, *Rescue Mission: Planet Earth, A Children's Edition of Agenda 21*, by the UK-based NGO, Peace Child International. The book reflects the feelings of children from all regions who were asked to describe in words and pictures what the Earth Summit meant to them. It also has inputs from about 50 experts and suggests practical ways for young people to follow up on the Earth Summit. Twenty-five thousand copies of the English language version were printed for release at United Nations Headquarters on Earth Day (22 April 1994).

In early June, *Growing Up*, an international film co-production by UNICEF, Television Trust for the Environment and Central Television Enterprises, was launched in London. The 53-minute film was broadcast in the UK on 5 June, World Environment Day. The film has been distributed to over 85 countries for broadcast use.

The film is part of a series in a long-term project to chronicle the lives of 10 babies born in 10 diverse regions of the world, within a year of the Earth Summit in Rio. From industrialized countries like Norway and the United States to developing nations like India and Kenya, *Growing Up* traces the lives of these children, their families and their contrasting environments and examines what the Rio Summit will mean for them now and in years to come. Issues such as child survival, protection and development are examined in the context of these communities, some of which exist on the edge of changing or endangered environments. The producers will be updating the stories of the children throughout the decade.

UNICEF also produced a 13-minute video, *Children First! Looking After Their Own Environment*, in English, French, Japanese, Spanish and an international version. The video was widely distributed during the International Children's Day of Broadcasting to field offices, national committees and television stations throughout the world.

Environmental education for children, youth and women is an important dimension of UNICEF plans to integrate PEC in the mid-decade and year 2000 goals for children.

In Ecuador, students at 100 primary and high schools in 21 provinces identified environmental problems in their communities and enlisted municipal support to correct them during the year. This nationwide effort had strong media support and follow-up from local authorities as each school participated in environmental workshops and prepared maps showing environmentally damaged areas. The schools were also involved in tree planting and the collection and recycling of garbage found on beaches and in parks and other community recreation areas.

UNICEF support for these activities also included sponsorship of an 'Amazon Summit' attended by 75 children from 52 municipalities in Ecuador's five Amazon provinces. The children recreated the Amazon's past through paintings, stories and plays and prepared a regional map highlighting areas polluted by oil, mercury and trash. The children's perceptions of environmental damage and the loss of forests and wildlife species were incorporated in an environmental awareness campaign in five cities.

◆ INTER-AGENCY COOPERATION: In September, UNICEF attended meetings of the Inter-Agency Committee on Sustainable Development in New York and the Advisory Groups on Environment and Sustainable Development of the Joint Consultative Group on Policy in Washington, D.C.

Unregulated factories emit pollution that has turned trees, grass and buildings permanently black.

WATER AND ENVIRONMENTAL SANITATION

MORE than 90 countries received UNICEF support for water supply and environmental sanitation (WATSAN) projects in 1993, but progress towards the mid-decade and year 2000 goals for the sector varied by region.

The year 2000 goal is universal access to safe drinking water and sanitation services and elimination of the water-borne guinea worm disease (dracunculiasis), while the mid-decade goal is to reduce current gaps in water supply and sanitation services by 25 per cent and 10 per cent, respectively. With concerted efforts, most countries in Asia and Latin America should be able to achieve their water supply targets, but environmental sanitation lags behind in both regions. In Africa, policy changes and a massive mobilization of resources will be needed to meet short- and longer-term WATSAN objectives.

In Africa's case, a two-pronged approach is being considered over the next two years to find resources for countries where the unserved population exceeds 10 million (Ethiopia, Kenya, Morocco, Mozambique, Nigeria, the Sudan, Tanzania, Uganda and Zaire), and to help the eight most successful countries so far (Botswana, Burkina Faso, Comoros, Côte d'Ivoire, Gabon, the Gambia, Swaziland and Zimbabwe) to achieve 100 per cent access.

UNICEF expenditure on WATSAN in 1993 amounted to US$84 million plus US$47.6 million for WATSAN support in emergency situations. This investment not only provided safe drinking water supplies and improved sanitation for populations in the 90 countries served, but also supported the development of national planning capacity and policy formulation, hygiene education, studies on cost-effectiveness and the time and energy spent on traditional methods of water collection, and monitoring and evaluation of sector activities. About US$1 million was also spent on support for innovative country-level approaches.

During the year, UNICEF supported reviews and evaluations of WATSAN programmes in Bangladesh, Benin, Bolivia, Brazil, Burkina Faso, Cape Verde, China, Colombia, Comoros, the Dominican Republic, Egypt, Ethiopia, Ghana, Haiti, India, Kenya, Laos, Madagascar, Mozambique, Namibia, Nepal, Rwanda, Sri Lanka, Tajikistan, Uganda and Viet Nam. The results showed that many countries are now using WATSAN programmes more vigorously as an entry point for other development activities to improve the quality of people's lives.

◆ NEW APPROACH: If WATSAN goals are to be achieved, UNICEF must widen its focus beyond the provision of services, including water-pumps and pipes, towards a broader concern for the health and socio-economic benefits of WATSAN programmes and linkages with environmental protection. A two-day global workshop to develop an appropriate strategy for this new approach was held in New York in April for leaders in the associated fields of water, sanitation, hygiene education, epidemiology, health, nutrition, and development planning.

The Executive Director told participants that water and sanitation, coupled with hygiene education, were stepping-stones to the World Summit goals for children. "We have come a long way in the last 50 years, but we will not meet the goals by the year 2000 unless we bring basic water supply and sanitation to everyone," he said. One of the workshop's main recommendations was that UNICEF increase its support to WATSAN from 14 per cent to 20 per cent of the overall programme budget, including emergency activities in the sector.

Workshop participants agreed that more emphasis should be given to: the empowerment of communities, and women in particular, by involving them more in decision-making, planning, design, management and evaluation of

66

A young mother bathes her child next to their house, precariously close to water level in an urban slum. In 1993, UNICEF supported water and sanitation projects in more than 90 countries.

UNICEF/93-0691/Horner

UNICEF/93-0031/Murray-Lee

A nearby handpump speeds up washing the dinner dishes and prevents illness.

WATSAN activities; capacity-building through hygiene education and the development of community skills and organization; the delivery of services that could multiply health and socio-economic benefits over time; linkages with other programme sectors, international agencies and NGOs; and advocacy as a central part of all WATSAN programmes.

Workshop participants included representatives from WHO, the World Bank, UNDP, Water and Sanitation for Health (WASH), USAID, the International Water and Sanitation Centre, McGill University, Harvard School of Public Health, All India Institute of Hygiene and Public Health, and University Federal of Pelotas (Brazil).

◆ HYGIENE EDUCATION: Major challenges for all countries are to create more public demand for sanitation services, and to mobilize to bring about changes in community hygiene behaviours in order to reduce water- and excreta-related diseases. During the year, UNICEF worked with WHO and the International Reference Centre for Water and Sanitation at The Hague to develop an international set of hygiene education guidelines that would increase attention to the health and socio-economic benefits from WATSAN programmes. A set of draft guidelines, based on proven methods, is expected by December 1994. Regional workshops were held in Bangladesh (October) and Viet Nam (December), and Bangladesh, China, India, Indonesia, Nepal, Pakistan, the Philippines and Viet Nam were identified as Asian countries where a strong emphasis is needed on environmental sanitation and hygiene education.

In Bangladesh, where the Drinking Water Supply and Sanitation Decade (1981–1990) spurred a major tube-well digging programme to make safe drinking water accessible to 85 per cent of the population, there is reason to hope similar gains might be made with sanitation services. The number of Bangladeshis using sanitary latrines doubled between 1990 and 1993, in large part because water supply, sanitation and hygiene education programmes were integrated (*see also 'Sustainable development — the environment'*).

◆ URBAN OVERLOAD: With the world's urban population growing at a rate of about 160,000 people a day, new and innovative ways will have to be found to create community access to safe water supply and sanitary waste disposal. Much of the new urban growth is in slums and squatter settlements beyond the range of city services.

Adding to the difficulties faced by residents of impoverished communities, like Israel Norte on the outskirts of Tegucigalpa (Honduras), is the cost of the water that does reach consumers. Private vendors charge more than 10 times the official government rate for water from town systems.

WHO maintains that no family should have to spend more than 5 per cent of its income on WATSAN services, but residents in barrios like Israel Norte were spending 30 to 40 per cent of their income on water until UNICEF joined forces with the Honduran Water Authority in 1987 to establish a special supply unit for marginal barrios.

The Authority offers three basic alternatives to inadequate supplies and exploitation by water vendors. They are: bulk sale of city water trucked to communal water tanks; drilling of community wells; and construction of household rainwater catchments, which in 1993 met more than half the water supply needs of 90 per cent of Israel Norte's families during the rainy season. The project has brought the cost of water down to about 4 per cent of household income for some

50,000 people in 26 barrios. UNICEF is also supporting a parallel project through which poor families can secure small loans to build sanitary latrines.

Such low-cost interventions are about the only chance people in barrios like Israel Norte have for the foreseeable future. In 1988, the Government was providing only marginal WATSAN services to 77 per cent of the capital's residents, and slum populations were growing at a yearly rate of about 5 per cent. Meanwhile, one child in every 10 born in Honduras was dying of diarrhoeal diseases before the age of five, and intestinal parasites, ARI and malnutrition related to diarrhoea were rife among the survivors.

◆ RURAL INTERVENTIONS: Most of the developing world's people live in rural areas where the quality of water supplies and standards of sanitation and hygiene are below those found in urban areas. Many live in small, isolated communities that could not sustain expensive urban-type services, even if governments were able to provide them. But this does not mean they must remain dependent on unsafe water supplies, or go without sanitary means of excreta disposal. UNICEF is spearheading efforts to provide effective low-cost systems directed to the needs of the millions of people in the world who do not have access to safe drinking water or lack sanitation services.

A small but significant example is the village of Dan Sa Vanh, 70 kilometres east of the Lao capital of Vientiane, where families have relied for many years on two unprotected hand-dug wells that invariably dry up during the arid months of March and April, making it almost impossible for mothers to take care of their children's most basic hygiene. Until now, the only backup supplies have been hand-carried from a natural spring two and a half kilometres up a steep hill. In 1993, UNICEF enlisted the cooperation of villagers to build a gravity-fed pipeline linking the spring with the village. UNICEF supplied pipes and fittings at a one-time cost of US$2,400, and villagers provided the labour and other supplies. The installation was scheduled for completion before the 1994 dry season at a cost to UNICEF of about US$5 per villager for safe water, on tap, 24 hours a day.

The successful installation of a low-cost water supply system in Dan Sa Vanh has special importance for the Lao People's Democratic Republic. The World Bank recently listed the country among the world's 10 poorest. Eighty-five per cent of the population lives in rural areas. Although there is an abundance of water to be had from the Mekong River and its tributaries, as well as from ponds and hand-dug wells, the risk of contracting diseases and infections such as dysentery, typhoid and hepatitis from these sources is high. Few of these traditional sources are sustainable through the dry season, leaving only about 15 per cent of the rural population with safe water supplies for drinking and domestic use.

During the year, UNICEF supported a number of other water supply and sanitation options in the country, including rainwater harvesting at a cost of about US$6 per capita for a family of six; hand-dug boreholes equipped with handpumps at a per capita cost of about US$1.70 for a community of 150; and the construction of household latrines for about US$1.30 per capita for a family of six.

In Mauritania, a 'save the green belt' approach is proving highly successful in fighting desertification, maintaining existing water supplies and reforestation, using community mobilization and better coordination of NGO and government support. The approach, which costs less than digging new wells, is inspiring many other similar projects.

In the Sudan, community involvement is proving the key ingredient for water, sanitation, hygiene and nutrition improvements in Kordofan State. Communities commit themselves to sharing costs with government, constructing latrines, forming village-level health and training committees and electing their own people for skills training. Activities extend to sensitization on environmental issues and starting nurseries for vegetables, fruit and shade trees.

Although low-cost WATSAN systems have been successful in all regions, bilateral support for this approach has been disappointing. Of the estimated US$10 billion spent in the developing world each year by governments and support agencies, only about US$2 billion goes towards projects for communities like those in Honduras and the Lao People's Democratic Republic. The remaining US$8 billion is directed mostly towards highly mechanized water-treatment plants, pumping stations and sewerage systems that service relatively well-off urban dwellers at subsidized rates. In the meantime, about 1.2 billion people in the world's poorest communities lack access to basic safe WATSAN services.

Unless the approach changes, present trends suggest that by the year 2000, some 770 million people will still lack safe water, and about 1.9 billion will be without adequate sanitation.

URBAN BASIC SERVICES

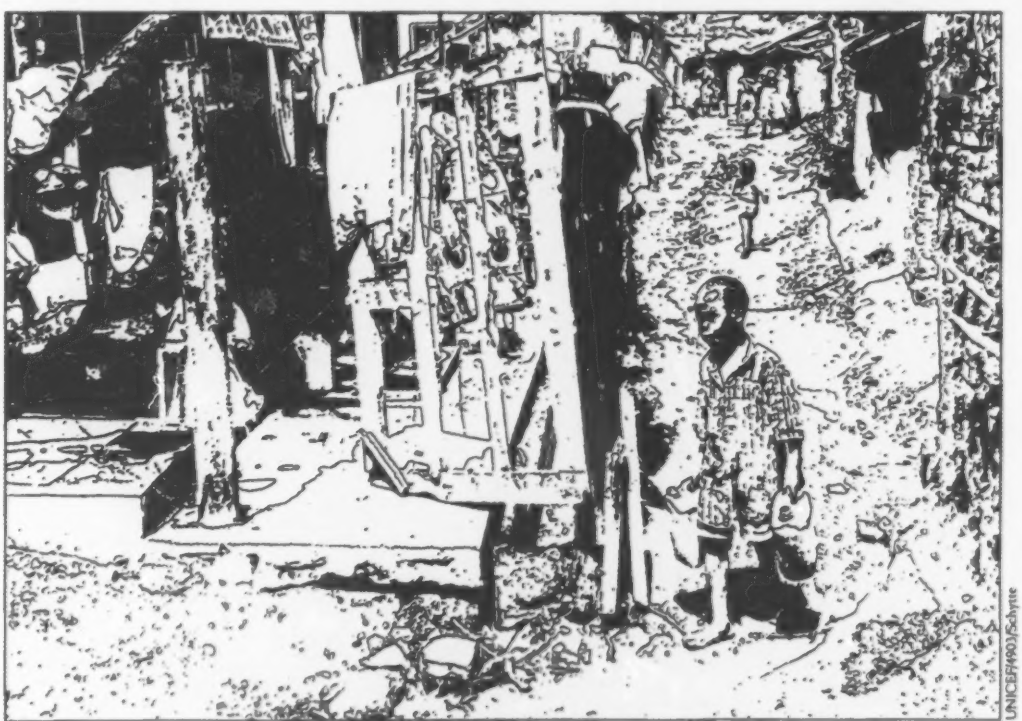
ONE benefit of the difficult transition to democracy and market economies in parts of the developing world and Europe has been the decentralization of more authority to local governments. By opening the door to popular participation in public policy, local governments should become more sensitive, responsive and accountable to community wishes.

Progress demands, however, that local government capacity to deliver and effectively manage the required level of services keeps pace with expectations. Capacity-building and resource mobilization must follow, accompanied by the political resolve to address the needs of the urban poor in particular.

The end of the cold war has also opened the door to ethnic and religious strife and increased the pressure on urban habitats in a number of countries. Towns and cities have become battlegrounds in which basic services are a prime target. Elsewhere, they have been overtaxed by migrants from rural areas, who often find less comfort in their new surroundings than they had hoped for. The infrastructure of towns and cities in much of the developing world is already stretched to the limit, and most migrants end up in slums and squatter settlements. These urban agglomerations, with inadequate shelter and limited access to safe drinking water, sanitation facilities and other services, can be breeding grounds for diseases that claim many millions of young lives throughout the developing world every year.

UNICEF revised its urban policy in 1993 to emphasize the mid-decade goals for children and the importance of public participation in meeting them. The revised policy focuses on poverty reduction, primary environmental care, rehabilitation and preventive approaches for urban children in especially difficult circumstances, as well as advocacy and technical support.

UNICEF has called attention to the need to link its partners with urban basic services (UBS) initiatives at national, subnational and community levels. One fruitful endeavour has been the continued sponsorship of international meetings of mayors of large cities to address the challenge of providing for children in poor urban communities and to share experiences. These gatherings have inspired municipal plans of action to meet mid-decade goals. By bringing public advocacy to bear on what must be done for the urban poor, it will be possible to mobilize additional resources for programmes for those who need them most (see also *'Mayors'*).



UNICEF/HQ00/Schytte

The pressure on basic services is increasing in towns and cities, where water can be both hard to find and expensive.

EDUCATION

WITH only six years remaining until the year 2000, it is painfully obvious that a real breakthrough towards the goal of Education for All will require stronger political and financial commitments to basic education. More and more countries are finding that after they have formulated NPAs, the domestic and global resources available to education fall far short of their aspirations. The low-income countries of sub-Saharan Africa and South Asia are having the greatest difficulty following up on the 1990 World Conference on Education for All (Jomtien, Thailand), but they are not alone. During the year, the Lao People's Democratic Republic, Lebanon and Namibia reported setbacks in raising supplementary funds to implement their education programmes, and several countries, concerned with the sustainability of their efforts, sought assurances of predictable support over the longer term.

In an effort to mobilize additional resources to achieve the decade goals, UNICEF encouraged governments to increase the budget share for basic education while making more efficient use of existing resources. UNICEF helped with the preparation of education cost studies in Bhutan, Burkina Faso, Myanmar, Uganda and Viet Nam.

Meanwhile, about 130 million children worldwide had no access to school in 1993 and almost 1 billion adults were illiterate. Two thirds of the adult illiterates are women, and the persistence of gender discrimination in the 1990s is condemning most of their daughters and granddaughters to the same fate.

◆ EDUCATION STRATEGIES: UNICEF activities during the year focused on strategies to improve access to primary education and to reduce drop-out rates and gender disparities — all major mid-decade stepping stones towards the year 2000 goals of universal access to, and completion of, primary education by at least 80 per cent of children who enrol. Strategy meetings were held for senior UNICEF field and headquarters staff in Bangkok, Bogota and Nairobi.

An Education for All Summit was held in New Delhi (15–16 December) to rally political commitment of leaders from nine large-population countries (Bangladesh, Brazil, China, Egypt, India, Indonesia, Mexico, Nigeria and Pakistan) to "ensure a place for every child in a school or appropriate education programme...." The Summit was hosted by the Government of India and sponsored by UNICEF, UNESCO and UNFPA. The President of Indonesia, the Prime Minister of India and the Vice-Premier of China attended the Summit, together with education ministers from the six other countries, who represented their Heads of State. Television spots produced for the Summit were carried internationally on CNN and by Star TV in Asia.

In his address to the Summit, UNICEF Executive Director James P. Grant noted that in Bangladesh the Prime Minister was personally overseeing the implementation of a compulsory primary education programme; in Egypt, the education budget had increased two and a half times in three years; in Mexico, a major reform had given local governments and communities greater voice in the management of local schools; and in India, the budget for education had been trebled in the current five-year programme, with half of the total allocated to elementary education.

UNICEF support for primary education in 1993 included: efforts to upgrade the planning capacity of education ministries; reviews and reforms of school curricula; the production of textbooks and teaching aids; training for school principals and teachers; and the strengthening of parent and community participation in the management and monitoring of schools.

In Bhutan, UNICEF continued to support a reform of primary education and the extension of new teaching approaches to communities living

Non-formal education is an important UNICEF strategy for improving the status of girls. This young student cares for her baby sister even while in school.

UNICEF/5860/Vilas

in dispersed mountain regions. UNICEF became involved with education reform in Bhutan in 1988 after a study by the World Bank concluded that teaching methods were stilted and the curriculum was unrelated to people's needs. UNICEF helped to develop a pilot project that improved the curriculum and supported overseas teaching and administrative training for Bhutanese teachers. The project has developed into a phased reform of the entire primary school system.

Evaluations of learning achievement in Bhutan and Namibia during the year brought recommendations for the abolition or refinement of school examination procedures. For Bhutan, it was suggested that end-of-year exams be replaced by periodic assessments of students by their teachers. In Namibia, it was suggested that the examination system should serve as a means of identifying more precisely the needs and capabilities of students rather than as a screen for promotion.

In Egypt, support continued for community-managed village schools, and in India, an Education for All flagship project in Bihar State promised the virtual transformation of education development in seven districts. With government backing and UNICEF support, more than 3,800 village education committees have been formed in Bihar to work with government schools and gradually take over the management of basic education at village level. The committees are involved in the planning and management of school construction and repair, the supervision of non-formal centres and student enrolment drives. More than 140 school units were completed in 1993, and another 423 were under construction. More than 830 villages had active women's groups in 1993, and elementary school enrolments rose by 20 per cent.

During 1993, Tamil Nadu became the first state in India to seriously consider laws to make primary education compulsory. The commitment was contained in the budget speech of the State Minister for Finance and was included in the state's 15-point Programme for Child Welfare, launched by the Chief Minister in November. Tamil Nadu has also accepted the challenge to eliminate child labour. In Uttar Pradesh, India's largest state, the World Bank is supporting a massive programme to strengthen primary education in 10 districts with 3.5 million children in the 6–11 age group.

In Bhutan, Colombia and Viet Nam, UNICEF support for multigrade schools — where students at several levels are taught simultaneously by one teacher in the same classroom — and ethnic minorities helped to reduce drop-out rates among ethnic minority children. In Nicaragua, promising steps were also taken to reduce primary school drop-out rates by assigning the best teachers to the first two grades, by providing light meals for students, and by automatically promoting students from first to second grade. Student performance was assessed at the end of the second grade.

UNICEF/A991/Lemoyne

The girl child: UNICEF has reinforced efforts to enrol and keep girls in school.

◆ THE GIRL CHILD: A number of countries, including Bangladesh, China, India, Nepal and Pakistan in Asia; Benin, Burkina Faso, Burundi, Malawi, Namibia, Rwanda and Uganda in sub-Saharan Africa; Algeria, Egypt, Morocco and Yemen in the Middle East and North Africa; and Ecuador in Latin America; established the reduction of gender disparity in primary school enrolment and completion as a mid-decade goal. Many conducted surveys on gender discrimination, while others including Burkina Faso and Morocco developed specific plans of action for girls' education. A Pan-African Conference on the Education of Girls, sponsored by UNESCO and UNICEF, called on governments to reduce gender disparity in education and to report progress to the 1995 World Conference on Women, to be held in Beijing. A UNICEF/World Bank seminar for eight Sahelian countries mobilized high-level political support for the enrolment and retention of girls in primary schools. The UNICEF MENA Regional Office prepared a report on ways of improving primary school enrolment rates for girls and increasing women's participation in literacy classes. Suggestions included: introduction of single-sex schools; inclusion of peace education and conflict resolution in the curriculum; improvement of facilities; and better training for teachers.

In Sierra Leone, a guide to factors influencing girls' attendance at school listed overwork in the

UNICEF/93-0863/Sep-Leveton

Their school is still being built, but these women, who have had no previous formal education, have already begun literacy classes.

home and fields, irrelevant curricula, school fees and sexual harassment as among the obstacles to their participation. Sexual harassment was also mentioned in a report from Namibia, where teachers said that boys tended to misbehave when seated next to girls. Early marriage and pregnancy also contributed to high drop-out rates among girls in Namibia. A proliferation of women's organizations in Sierra Leone was found to be directly related to increased demand for literacy programmes, and in Zambia the existence of women's clubs was said to have provided year-round learning opportunities for women.

◆ EARLY CHILD DEVELOPMENT: A UNICEF policy review, *Early Childhood Development: The Challenge and the Opportunity*, was the basis for programme reviews in 10 countries in 1993. It also served as a reference for five training workshops and various international forums including a francophone summit in Mauritius, where 46 leaders adopted the Dakar Declaration on Young Child Protection, Survival and Development.

Collaboration with the main Education for All partners (UNDP, UNESCO and the World Bank) continued in 1993, and closer working relationships were established with the Christian Children's Fund, Save the Children USA and UK, and the Organization of American States.

◆ CAPACITY-BUILDING: During the year, emphasis was placed on capacity-building in Africa, in particular. In collaboration with the UNESCO International Institute for Educational Planning, primary education policy seminars were held in Burkina Faso and Uganda to examine constraints to implementation of the plan of action drawn up at the Jomtien conference. The meetings were attended by government ministers, senior policy makers and researchers from Botswana, Burkina Faso, the Central African Republic, Chad, Ethiopia, Kenya, Malawi, Mali, Mauritania, Niger, Tanzania, Uganda, Zambia and Zimbabwe.

The delivery of primary education services to children in emergency situations was the subject of a proposal prepared by UNICEF and the Oslo-based International Multi-Channel Action Group for Education. It was drafted in consultation with the UNICEF Somalia team, with a view to possible implementation there and in other complex emergency situations.

◆ MONITORING: The effective universalization of basic education will depend on each country's ability to monitor learning achievement. In 1993, UNESCO and UNICEF implemented a monitoring project in China, Jordan, Mali, Morocco and Mauritius to develop assessment methodologies and improve their databases. As a result, Jordan introduced an ongoing, biannual system of learning achievement assessment.

The importance of preschool education was assessed in several countries during the year. In Honduras, it was found that primary school children who had completed a UNICEF-sponsored preschool programme were less likely to drop out. In the Dominican Republic, primary school teachers reported that first graders who had completed the preschool programme learned more quickly, participated more actively in class and

MLADOST DISTRICT, SOFIA, BULGARIA

Opening doors to Gypsy children

It is just after 6 a.m. on a cool Monday morning, and as dawn breaks on the front steps of the Denitza Kindergarten, the first of some 60 children aged five to seven begin arriving with their parents. The children — some day students, others boarding for the week — are as focused on the prospect of a hot school breakfast as they are on the goodbyes. Most are Gypsies from the surrounding 'Youth' neighbourhood, named after the predominantly young, low-income families who live in the state-owned apartment buildings there.

UNICEF/Scott

K19, as it is usually known, is the site of a new and already successful pilot project, launched by the Bulgarian National Committee for UNICEF, to help children of the nation's ethnic minorities, in particular Gypsies, overcome their educational deficiencies. Housed in a modern three-storey school building with large playrooms, a kitchen, bathrooms and dormitory, K19 is one of six state-run schools whose culturally sensitive and stimulating curriculum — designed as part of the pilot project in the 1992–1993 school year — is improving the lives of young Gypsies.

Through the education project, children learn Gypsy folk arts and crafts, dances, fairy tales and songs. Wall maps are used to trace the migration of their ancestors to Bulgaria, and teachers help each child to construct a family tree based on information gleaned from grandparents and other family members. Perhaps most important, the classes are bilingual, so children become proficient enough in Bulgarian to hold their own once they enter primary school.

"Gypsy children are in a very bad position when they start school," said Penka Baltova, a psycholinguistics expert at Sofia University. "They can't write or even say what the others already know, so they are considered stupid."

There are about 577,000 Gypsies in Bulgaria, making them the second largest of Bulgaria's minority groups, which together comprise about 15 per cent of the country's 9 million people. Bulgarian Turks (numbering 633,000) and Bulgarian Muslims (269,000) are the others. Enforced settlement, beginning in the 1950s, ended the Gypsies' nomadic way of life, and most now live in some 550 Gypsy neighbourhoods, known as *mahali*, in different parts of the country. The *mahali*, some with up to 18,000 inhabitants, are crowded and ill equipped, with limited access to safe drinking water and sanitation services ranging from poor to non-existent.

Indicators for Gypsies are troubling: their birth and mortality rates are higher than the national norms. Illiteracy and unemployment rates, about 13 and 15 per cent nationally, are 60 per cent or more among the Gypsy population.

The Bulgarian National Committee for UNICEF conducted a survey in 1991 and found that Gypsy children, comprising less than 9 per cent of the school-age population in Bulgaria, were virtually segregated in the national school system. Of 31 primary schools providing intensive labour training in Bulgaria in 1991, all were in communities with high Gypsy populations. The schools concentrated only on training that would prepare students for low-skill jobs, and all had exceptionally high drop-out and repeat rates. Another 73 schools, which catered mainly to Gypsies, were characterized by the Ministry of Education as having "low living standards and culture," and rarely addressing the children's special interests or needs.

The Committee assembled a team of national experts to examine the problems faced by Gypsy children. Low proficiency in the Bulgarian language and diminishing cultural identity were recognized as the main stumbling-blocks to their advancement.

New educational materials and training courses were then produced for 60 teachers. These were field tested in the summer of 1992, and in January 1993 about 500 Gypsy chil-

73

dren from 3 to 16 years of age were enrolled in six special state-run schools. The schools were chosen to reflect Bulgaria's different regional, religious and ethnic backgrounds.

The project developed bilingual teaching methods and materials for nursery and primary levels to build Bulgarian language skills and provide training in health and personal hygiene. For older children, as well as the younger ones, the project also developed lessons on the history of Gypsies, emphasizing features of their culture and traditions. Because early marriage is common among Gypsies, secondary-school project activities included information on sex education and family planning. Each aspect of the curriculum was designed to establish pride in the Gypsy culture and positive identification with its influence on Bulgarian society, an approach that has been reinforced since the disintegration of the former Soviet Union by a resurgence of interest in Bulgarian culture.

Ms. Baltova said the project had demonstrated the need for the bilingual approach for Gypsy children. "In kindergarten we have given them the vocabulary they need for starting primary school, mainly through play and stories, and we have seen how this bilingual approach changes teachers' attitudes and makes them more sympathetic to the problem. At the university, there is a new interest among our students in bilingualism and the problems of minorities. Many students are now volunteering to visit and work in these schools."

Since its inception, the project has also published three books, drawing on UNICEF Education for Development guidelines and the Convention on the Rights of the Child. Before the project started almost no books on the subject of Gypsies were available in Bulgaria, and there are indications that the popularity of these new volumes among parents has increased enrolments in some schools.

Advocacy has been an important element of the initiative. A project team regularly visited civic leaders, teachers and local Gypsy communities near the six pilot-phase schools. School budgets were tight, prejudices against Gypsies often ran high with teachers as well as officials, and local leaders needed encouragement to allocate resources to a 'minority' activity. The Gypsy communities were also suspicious, because of past experience.

Support from the Ministry of Education has also been a key to the project's fast start. It gave teachers permission to join training courses and appointed Khristo Kuckukov, the National Committee's coordinator for the project, as the Ministry's chief expert on minority interests in 1993. Mr. Kuckukov is a Gypsy, and his new role will be important in the Committee's efforts to have the project accepted as a national standard for the bilingual education of children of Gypsy and other ethnic origins.

The project was launched on a shoestring budget of US$20,000, which primarily paid for books and other materials for the schools. Summer training courses were held between June and December 1993 for student volunteers and teachers, and in July a review meeting with the project team and other national experts resulted in a decision to extend its activities to another six schools in 1994. The budget for the year was US$116,000, of which US$80,000 was earmarked for books and teaching materials and US$18,000 for consultants' visits and technical assistance to the schools.

According to Rossitza Milatchkova, then Executive Secretary of the National Committee, some of the money needed over the next three years would be raised directly from the sale of UNICEF greeting cards in Bulgaria. The National Committee is also expanding its partnership to NGOs, including the Christian Children's Fund of the United Kingdom, which is supporting a basic needs project for poor children and a free school lunch programme for Gypsy children.

Professor Ivan Chernozemski, the National Committee President and Bulgaria's Minister of Health in 1990–1991, said the project was breaking ground for other activities as well.

"The economy is difficult, but we are not short of well-trained people," he said. "We have to develop new ways of doing things. By showing what can be done for the Gypsies we may be able to demonstrate what can be done for the Convention on the Rights of the Child, for example, and for a national programme of action for children. We must also promote a sense of tolerance among children. We cannot afford hostility among ethnic groups. We need to introduce our children to the history and culture of our neighbouring Balkan countries. In that way we will eventually overcome our feelings of suspicion and mistrust."

had more self-confidence. In Viet Nam, a similar evaluation showed that children who attended preschool programmes had better psychomotor coordination. Although there were biases in each of these studies, the feedback they provided to parents was considered important in communities in the Dominican Republic, for example, where many preschool centres had been closed because of low attendance.

Preschool programmes were also evaluated in mosque-based education in Bangladesh and Kenya, and in informal systems in Chile, Peru, Thailand and Zimbabwe.

◆ **ADULT LITERACY:** UNICEF has been working with UNESCO to develop effective means of evaluating the learning achievements of adult students. During the year, initiatives were under way in several Middle Eastern countries and were being tested in Bangladesh and Turkey.

In Ecuador, the National Literacy Campaign reported a successful combination of literacy training with education in democracy, but there had been no actual measurement of learning achievement. While 40 per cent of teachers said that their students could read and write comprehensively, the other 60 per cent reported that their students could read and write only with difficulty. Almost 90 per cent of the teachers interviewed said, however, that the design of training workshops, literacy guides and work documents was good, and more than 90 per cent said that they were happy to have participated.

EDUCATION FOR DEVELOPMENT

THE need to help young people develop attitudes and skills to counteract intolerance, ethnocentrism and racism in the world community was a common concern reflected in many Education for Development (EDEV) activities in 1993. And it was complemented by a significant shift in perception about EDEV itself, from the somewhat abstract idea that it should be education about development issues, to the view that it should focus on problem-solving, community-building and skills that would empower young people to create better futures.

The 39th Annual Meeting of National Committees, which took place in Athens in May, reinforced the opinion of many Committees that they should become involved in action against intolerance, and EDEV workshops during the year went on to deal with such issues as global interdependence, conflict resolution, tolerance, the environment and sustainable development.

The first official National Committee EDEV workshop was held in Annecy (France) in

UNICEF/Lemoyne

A step towards Education for All: This boy is one of millions of children targeted by the leaders of nine high-population countries who have committed themselves to "ensure a place for every child in a school or appropriate education programme."

BEST COPY AVAILABLE

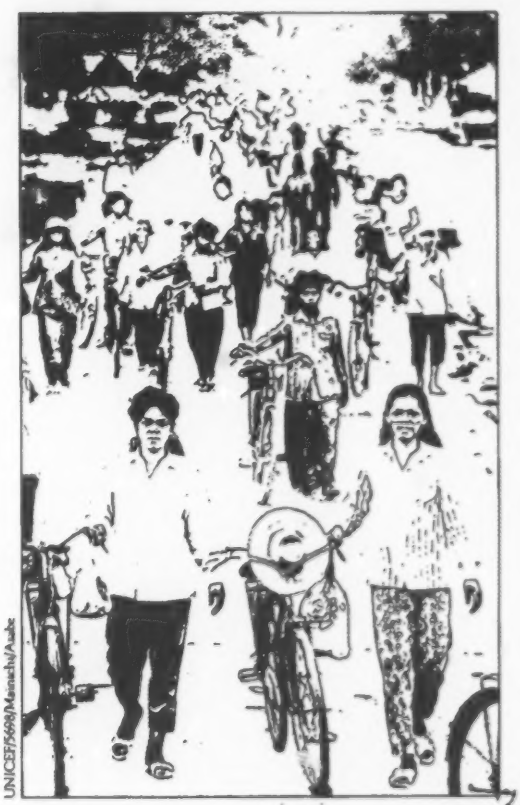
September. Other workshops, more specific in theme, were held in CEE and in the Caribbean. A workshop in Sofia in June, in conjunction with education ministries, curriculum planners, teacher trainers, and UNICEF programme and National Committee staff in the CEE and Baltic regions, emphasized the need to support young people, through education, in times of rapid social change. A workshop in Georgetown, the capital of Guyana, in July was held at the request of TACRO to explore national education reform. Stress was laid on the importance of education methods, as much as content, in giving young people the skills to resolve their differences and participate productively in their communities. The themes of tolerance and reconciliation were also at the heart of a workshop held in Novi Sad (former Yugoslavia) in March, where strategies to help lessen the trauma of war were demonstrated to groups of primary school teachers.

Activities overall in 1993 centred on training in EDEV ideas and methods for teachers, education authorities, curriculum planners and teacher trainers, as well as the production of materials to help teachers investigate global issues, including development, justice, peace and environmental protection, with their students.

A challenge for teachers in a variety of cultural and educational settings has been to find ways of presenting the Convention on the Rights of the Child as more than a dry, legal document. An EDEV publication, *It's Only Right: A Practical Guide to Learning About the Convention on the Rights of the Child*, was published during the year. It is available in English, French and Spanish and is being widely distributed to National Committees and UNICEF regional and country offices. The book presents participatory strategies to help teachers and youth group leaders study child rights with their students or group members.

A comprehensive EDEV teaching manual targeted towards the 7–18 age group in both industrialized and newly industrialized countries was pilot tested globally with the help of National Committees and UNICEF regional offices. It is to be published in summer 1994.

WOMEN IN DEVELOPMENT



UNICEF/5698/Mainichi/Asahi

Women on the march: UNICEF believes that women's development is integral to the social and economic development of society as a whole.

WITH the Fourth World Conference on Women drawing near (Beijing, September 1995), UNICEF and its partners face two important challenges: to sensitize policy makers to gender issues and to help women recognize and remedy injustices and the deeply ingrained discrimination affecting them.

UNICEF has created a women's equality and empowerment framework, centring on the following five elements, to help women and those concerned about issues affecting them assess institutionalized discrimination and gauge how effectively programmes address it:

- Welfare – What is the status of women, relative to men, in nutrition and income? Such measurements are essential to reveal basic social inequalities.
- Access – How extensive is women's lack of access to services such as education and training, both vital elements for social development?
- Awareness – Are women aware of the social and political factors that inhibit their advancement? These factors, often concealed by traditions and long-standing and accepted social norms, need exposure if women are to act to improve their situation.

• Participation – How fully and equally are women represented in project planning, from needs assessment to management, implementation and evaluation? If they are not, projects will reflect and replicate the powerlessness women experience generally.

• Control – Do women play equal roles with men in decision-making, control of the factors of production and distribution of benefits? Such equality is essential if women are to gain the economic power on which progress depends.

This framework informed many efforts in 1993 with considerable success. Many countries, including Egypt, Guinea-Bissau, Kenya, Nepal, Pakistan, the Philippines, Sierra Leone, the Sudan, Viet Nam and Zambia, recognized the need to pay more attention to gender issues in the pursuit of the mid-decade goals for children.

In the vital area of education, UNICEF-supported activities included operational research and studies on girls' education in Burundi, Chad, China, Ethiopia, Mauritania, the Sudan and Togo; advocacy with education policy makers and grass-roots organizations in Nepal, Pakistan, the Sudan and Zambia; and revision of school texts in Honduras to eliminate sexual stereotypes.

The Government of Kenya introduced gender analysis at all stages of its country programme preparations; the Ministry of Education in Benin eliminated school fees for girls in rural areas; and China continued to make progress, establishing special classes for girls in the primary grades and vocational classes for older girls.

◆ **PARTICIPATION:** In Brazil, UNICEF supported a programme on women's rights in law and life that articulates the concerns of women's organizations, advises congressmen on gender issues and promotes the development of gender-sensitive legislation and public policies. UNICEF also supported initiatives to reduce women's workload (Tanzania); raise their level of education and control over income (Cambodia); and increase their say in the management of community resources by village development committees (Sierra Leone).

◆ **THE GIRL CHILD:** A number of countries maintained their focus on the girl child. UNICEF advocacy for the protection of children, and girls in particular, from sexual exploitation in Sri Lanka attracted priority attention from police, the Tourist Board and immigration authorities. UNICEF also produced a video on the girl child and sponsored a study in Nepal on trafficking in girls by the sex industry.

A national steering committee in the Sudan, comprising representatives of the Ministries of Health, Social Welfare, Education and Planning, as well as NGOs and UNICEF, was formed to guide the elimination of harmful traditional practices, including female genital mutilation, by the year 2000. And an agreement to combat these practices was also reached with the Islamic Association in Guinea-Bissau.

UNICEF/5714/Goodsmith

Women are increasingly being taught non-traditional skills as part of an effort to help them become economically self-reliant.

◆ **POLICIES FOR WOMEN:** National policy development for women advanced in many countries, often in tandem with democratization. UNICEF supported these efforts, mainly through advocacy, in Brazil, Burundi, Cambodia, Ethiopia, Guinea-Bissau, Honduras, Mauritania, Pakistan, the Philippines, Sierra Leone, Sri Lanka, Viet Nam and Zambia.

In Cambodia, the provisional national Government created a new Ministry of Sports, Youth and Women's Affairs, as well as a Division of Women's Affairs.

In Viet Nam, a National Committee for the Advancement of Women was established to coordinate implementation of the international Convention on the Elimination of All Forms of Discrimination against Women. The Committee comprises high-ranking officers from the State Planning Committee, the Ministry of Foreign Affairs and other ministries, as well as representatives of the Viet Nam Women's Union and other organizations.

In Burundi, a new Ministry of Social Action, Human Rights and Women's Development started work on a plan of action for women's development, to be published in 1994.

In the Philippines, the National Economic and Development Authority and the National

UNICEF champions female literacy, a major means of improving the social well-being of women.

UNICEF/BASE/Vilas

Commission on the Role of Filipino Women have a mandate to ensure that, among other things, government departments create employment opportunities for women and evaluate the extent to which women have been integrated into the planning, management and monitoring of development projects.

In Mauritania, the Executive State Secretariat for the Promotion of Women was given responsibility to develop a national strategy for women in development and to monitor government performance in this area.

◆ ADVOCACY OUTREACH: In South Asia, with UNICEF support, a news network — 'Women's Watch' — was set up to encourage investigative reporting and monitoring of women's and children's issues in the region by women journalists both from the region and from Nordic countries.

UNICEF will also release a new publication, *Girls and women: A UNICEF development priority*, that describes the obstacles to women's progress and the initiatives and strategies UNICEF advocates for overcoming them.

◆ IN-HOUSE TRAINING: UNICEF also took action to develop a better understanding of issues concerning gender and women in development in its own offices. A gender-training package, based on the five-point women's equality and empowerment framework, was tailored to the UNICEF mandate and country programme process in order to improve the capacity of the organization and its counterparts to address gender issues. About 520 UNICEF programme officers and representatives worldwide attended courses during the year, and training was provided for government counterparts and UNICEF partners in Bangladesh, Brazil, Eritrea, Iran, Pakistan, Sierra Leone and Viet Nam.

WOMEN ON THE AIR WAVES

Two Brazilian radio stations in the State of Maranhao have responded to a UNICEF initiative by broadcasting programmes devoted to women's issues in popular morning time slots.

An hour-long 'Women's Life' programme, launched with UNICEF support in 1990 on the Educational Radio of Maranhao (Sundays, 8-9 a.m.), has been picked up in a shorter format by Radio Mirante AM — the state's second most popular station.

Since March, Radio Mirante AM has run the programme on Mondays, Wednesdays and Fridays from 11.15 to 11.30 a.m., complete with live and pre-recorded interviews on themes that are especially close to women's lives. There is a women's journal with a summary of weekly news, recipes and music, and segments on work life, health, education, women's rights and the law.

Programming also covers marital relationships, including sexuality and violence against women, and matters affecting girls and adolescents.

The radio programmes are part of a training programme for broadcasters established by UNICEF and the Brazilian Association of Radio and TV Networks.

The programme trains professional broadcasters and NGOs that have an opportunity to air radio programmes but lack the know-how.

Other radio programmes that have been developed as a result of this initiative include a weekly health programme in Campina Grande (State of Paraiba), one on women's issues in Teresina (State of Piaui) and another on child rights in Salvador (State of Bahia). The programme has so far trained 873 broadcasters with support from the Government of the Netherlands.

Both radio stations in Maranhao report a growing response from listeners, and the Communications Department at the federal University of Maranhao is evaluating the effort to see how the programme might be developed further.

Maranhao is in the impoverished north-east area of Brazil, and the main audiences for both radio stations live in rural areas and on the urban fringes of Sao Luis, the state capital, which has a population of 700,000.

SUPPLY MANAGEMENT

EMERGENCY demands and orders from other organizations and governments raised the volume of UNICEF's worldwide purchases from US$370 million in 1992 to more than US$373 million in 1993. Over US$112 million of that amount was handled by the UNICEF warehouse in Copenhagen, which expanded its computerized support systems to manage the additional traffic.

Supplies for regular UNICEF programmes, emergencies and administrative needs approached US$303 million, a 3 per cent decrease from 1992, while procurements on behalf of governments, NGOs and other United Nations bodies rose by 35 per cent (from US$52 million in 1992) to about US$70 million. The value of emergency shipments from the warehouse and directly from suppliers exceeded US$87 million.

Also fuelling the demand for supplies through UNICEF is the organization's capacity to purchase goods and equipment in bulk and negotiate the lowest possible prices. Copenhagen is a duty-free port, and UNICEF passes along these advantages at cost.

The warehouse, which was provided by the Danish Government, is the largest enclosed structure in Europe, big enough to house three football fields. Within the constaints of its stocks, it has the capacity to order, store, assemble, pack and ship emergency supplies to any part of the globe within 48 hours. Its emergency medical kits are, in effect, a hospital in a crate, which can dispense a range of services anywhere in the world within a few hours of arrival.

Among the largest United Nations customers are PAHO, UNDP, UNFPA, UNHCR, UNRWA and WHO. WHO manages the specifications of medical kits according to their destination and the emergency at hand, as well as helping design and develop innovative health care equipment. A number of World Bank-funded projects placed orders through UNICEF during the year, the largest of which was for pharmaceuticals for the Government of Romania.

UNICEF/93-1036/Pirozzi

UNICEF flies in humanitarian relief to many of the world's trouble spots.

Major sources of demand in 1993 included the former Soviet republics, former Yugoslavia and a number of African countries. Their needs ranged from emergency shelter and foodstuffs to medical supplies and essential drugs.

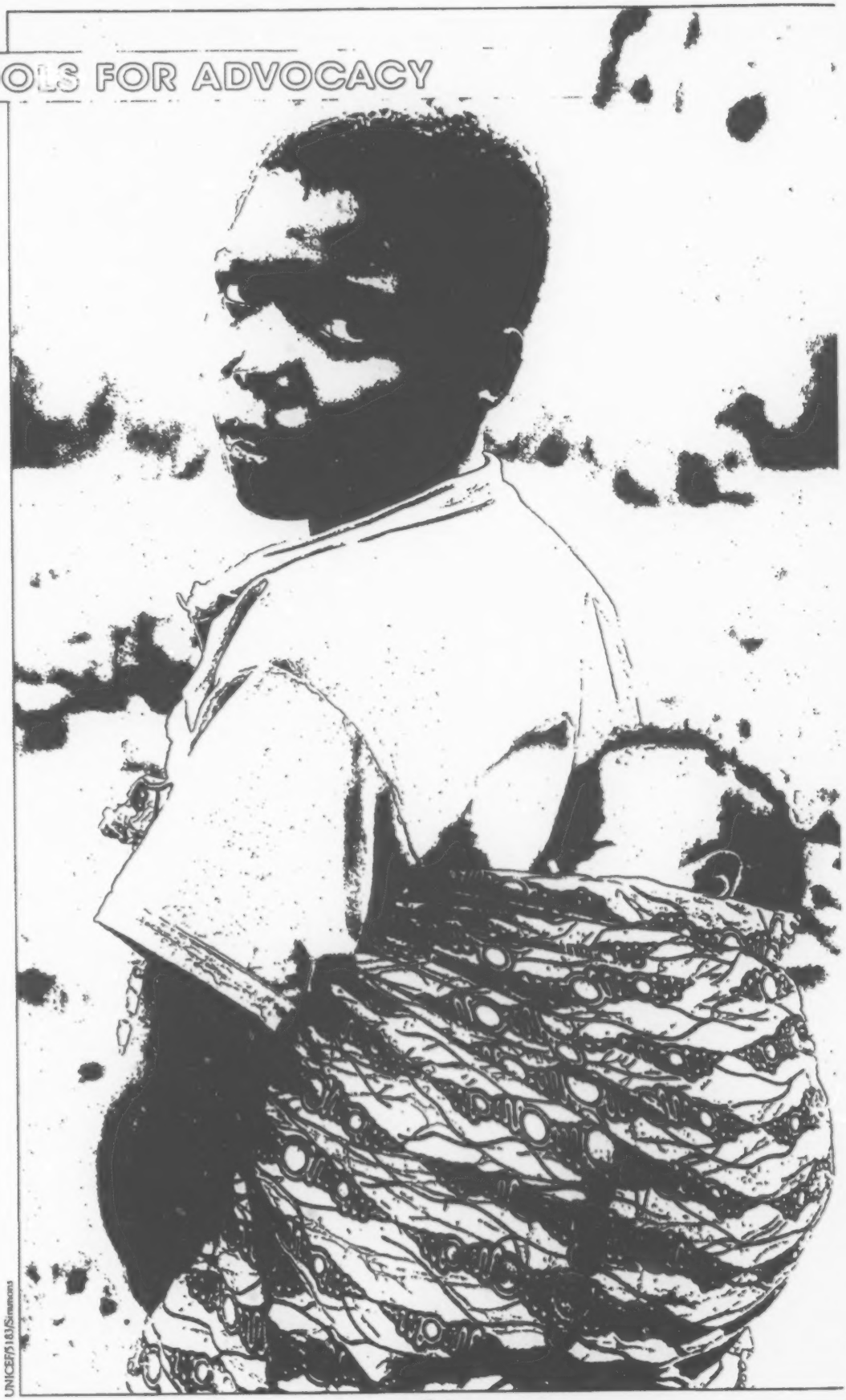
To make optimum use of UNICEF's Supply Division resources, most of the New York Supply Section was consolidated into the Copenhagen operation in 1993, and a new Field Services Section was created.

EVALUATION

THE Evaluation and Research Office has developed a database containing more than 6,000 evaluations and studies of UNICEF-assisted programmes and projects carried out by UNICEF since 1987. Regional offices and selected country offices received a copy of the database on CD-ROM in May for testing. The official version is to be distributed organization-wide on CD-ROM in 1994. The technology is expected to greatly improve the institutional memory of UNICEF and its ability to access and share lessons learned from its global activities.

During the year, country offices also received a country-specific test edition to systematically record, monitor and review programmes. This software is designed to increase the use and sharing of evaluation results, monitor and review the quality of evaluation activities, ensure that recommendations from past evaluations are remembered and brought to bear in programme strategy meetings, improve the scientific basis for advocacy, and improve 'transparency' by recording the basis for decisions made throughout the country programme.

TOOLS FOR ADVOCACY



UNICEF/5163/Simmons

UNICEF's public visibility was at an all-time high in 1993 with the release of numerous new print, video and radio information products and growing media interest in the organization's activities for children.

There was major international and local media coverage of the global launch of UNICEF's pioneering report, *The Progress of Nations*, in September and the release of *The State of the World's Children 1994* report at the White House in Washington, D.C. in December. At the World Conference on Human Rights in June, children's rights and welfare, and UNICEF's role in protecting and promoting them, were reported by a wide spectrum of media. The Day of the African Child (in June) and the third anniversary of the World Summit for Children (in September) afforded an opportunity to once again draw attention to the organization's priority goals for the year 1995 and the Convention on the Rights of the Child.

Along with high-profile publications such as *The Progress of Nations* and *The State of the World's Children*, UNICEF also released a wide range of smaller, more tightly targeted information and advocacy tools to help meet the growing demand, in both the industrialized donor nations as well as the developing world, for information about UNICEF projects and programmes. *Facts and Figures* provided an at-a-glance summary of statistics and issues, and the Features Service, circulated to media worldwide and National Committees, carried numerous human interest development stories. Speakers' Notes, on UNICEF issues enriched with statistics and quotes, were introduced to help National Committees and field offices answer media questions and prepare speeches and articles.

First Call for Children, a quarterly publication, carried more than 120 articles during 1993 on such topics as NPAs in Latin America and Asia, salt iodization, polio eradication, ORT, water and sanitation, implementation of the Convention on the Rights of the Child and education. The periodical is produced in English, French, Spanish and Arabic and has a combined circulation of over 50,000 copies.

To make these products even more accessible, all were loaded onto the UNICEF Electronic Information Network (UNET) and disseminated widely, before they were available in final print form.

Shifting its attention to the situation of children in the industrialized countries, UNICEF published *Child Neglect in Rich Nations*, which describes how and why some of the wealthiest nations in the world have short-changed children. Written by British economist Sylvia Ann Hewlett, the book was launched together with *The Progress of Nations* to wide media acclaim.

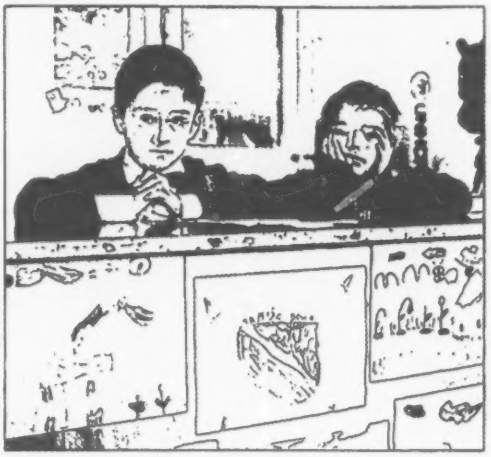
Broadening its publishing role, UNICEF sought external publishers for a collection of drawings and writings by war-traumatized children of former Yugoslavia. By the end of the year, publishers across the world had committed to publishing the book, *I dream of peace*, with a combined print run of 150,000 in nine languages (*see following box*). UNICEF also supported the production of three other books by commercial publishers. Two had environmental themes — *Tell the World*, an illustrated version of 13-year-old Severn Cullis-Suzuki's moving speech at the United Nations Conference on Environment and Development in Rio, and *Rescue Mission*, a colourful children's edition of the Rio conference's programme of action, Agenda 21. *Between the Guns*, by the former UNICEF Deputy Executive Director for External Relations, the late Varindra Tarzie Vittachi, examined the growth of UNICEF's involvement in trying to meet the needs of children affected by armed conflict.

A network of other important information activities bolstered UNICEF's work. The Global Communication Support Fund collaborated with field offices to identify promising communication projects, train communicators and fund multimedia products. The second International Children's Day of Broadcasting drew more than

UN Secretary-General Boutros Boutros-Ghali and UNICEF Executive Director James P. Grant opened a round table to discuss progress on Summit goals, co-chaired by Prime Minister Begum Khaleda Zia of Bangladesh (centre).

BEST COPY AVAILABLE

Knowing first hand the effects of war on children's lives, two young people take part in the launching of *The State of the World's Children* report.



UNICEF/93-1157/Gubelic

800 television and radio stations in 108 countries into a growing media partnership for children, encouraging them to air UNICEF programmes or produce specials of their own.

The Day's success is just part of the revolution in communications, which has opened the door to a vast global audience previously unreachable by electronic media. UNICEF continued to broaden and strengthen its relationships with international satellite channels and television and radio networks as vehicles for programmes about and for children. It also increased its collaboration with major networks, including Star TV, BBC World Service Television, CNN and the European Broadcasting Union, and began to assess television prospects in Central and Eastern Europe.

A series of opinion polls, conducted by several National Committees, offered insights into public perceptions and misconceptions about development to help fine-tune advocacy materials. The importance of television was confirmed by the finding that 77 per cent of Europeans rely on it as their primary source of news about developing countries. However, the majority of those interviewed said that most of what they saw left them with an unfavourable impression. Analysis of the polls also showed that while there was a high level of general support for development assistance to developing countries, public understanding of why aid is needed is rather superficial.

IMAGES FROM THE FRONT LINE

"When I close my eyes, I dream of peace."

The words are those of Aleksandar, a young boy hospitalized with severe burns after a Molotov cocktail was thrown in his direction a year ago in Sarajevo. Aleksandar survived, and his dream is now the title of a UNICEF book dedicated to the children of former Yugoslavia who are enduring a nightmare now in its third year.

The horrors of this war, including 'ethnic cleansing' and the deliberate targeting of children, have so far claimed the lives of 15,000 girls and boys and created almost 4 million refugees, 600,000 of them children. Among the child survivors are tens of thousands whose wounds are on the inside. Feelings of anxiety, fear and guilt are taking a terrible psychological toll.

To help them overcome their trauma, children in dozens of schools and refugee camps throughout former Yugoslavia were asked to express their feelings in words and drawings. With the help of parents, teachers, psychologists and art therapists, they recalled not only their traumatic experiences but also happy memories from the past. It was hoped that the exercise would unlock doors to their inner emotions and encourage them to express their hopes of a more promising future. The children's yearning amid death and destruction is poignantly captured in the book, *I dream of peace*.

"If only you knew how it feels to have your father in the war," writes Zana, a 12-year-old refugee. "You flee the misery, but misery follows. You hear not a word about your father, and one day everything goes black and there is Daddy at the door. He stays with you a few days and then happiness is gone again.

"My heart, it is pounding like a little clock. I can hardly write this because my beloved Daddy is once again not here with me."

Ten-year-old Roberto writes:

"If I were President,
The tanks would be playhouses for the kids.
Boxes of candy would fall from the sky.
The mortars would fire balloons.
And the guns would blossom with flowers...."

Commercial publishers will market the 80-page full-colour book worldwide in at least nine languages. It will have a combined print run of 150,000 copies and is scheduled for launching between March and June 1994.

This is the first time UNICEF has sought outside publishers to distribute one of its publications on such a scale. Proceeds from the sale of the book will support programmes for children affected by war throughout the world.

Deepening this understanding has therefore become a major advocacy challenge.

Field offices played dynamic roles in spreading awareness of UNICEF issues and interventions in developing countries, through television, video, radio and print products, as well as through the advocacy of political leaders and celebrities. In many countries, communicators from different media attended workshops, seminars and courses on media and development. UNICEF photographs continued to capture the drama and poignancy of development for a wide audience including the media, NGOs and commercial publishers.

UNICEF furthered its cooperation with information and communication counterparts in other United Nations agencies and organizations in joint efforts to broaden understanding of development issues. A JUNIC (Joint United Nations Information Committee) Development Information workshop was organized by UNICEF, UNDP and UNFPA in September for information directors of bilateral and multilateral development agencies to discuss ways of putting sustainable development on the media agenda and reversing a decline in public support for development assistance.

Some 20 United Nations organizations and specialized agencies belong to JUNIC, which develops and promotes information projects of common interest. The Director of the UNICEF Division of Information was elected chairperson of JUNIC for 1994–1995.

PUBLICATIONS

THE PROGRESS OF NATIONS

MOST nations produce quarterly statistics on the health and growth of their economies, but very few produce statistics, even annually, on the health and growth of their children.

In an effort to correct this gap in government perspective, UNICEF launched a new, high-profile, international report, *The Progress of Nations*, on 21 September in London, with simultaneous release in over 100 other countries, to almost universal media applause.

The publication reported on progress towards the World Summit goals for children in the areas of survival, nutrition, health, education, family planning and progress for women, and challenged nations to improve their systems of collecting data on children. It also addressed the situation of children in the industrialized world, provided data for all regions and indicated gaps in the performance of individual nations towards meeting their children's needs. It showed, among other things, that a number of low-income countries had achieved much greater social progress than wealthier countries, largely because their spending priorities favoured human development over other expenditures.

The report observed: "The day will come when the progress of nations will be judged not by their military or economic strength, nor by the splendour of their capital cities and public buildings, but by the well-being of their peoples."

Acknowledging that this first annual accounting of national progress for children was constrained by the limited availability of comprehensive or current child-related statistics for many countries, *The Progress of Nations* urged all governments to recognize and urgently correct these deficiencies in their data collection.

This message, added to the low level of government investment in most countries for meeting basic human needs of children and women, captured the attention of major print and elec-

Maybe one day, nations will pay as much attention to the growing minds and bodies of their children as they do to their economic indicators.

UNICEF/4689/Keary

An important part of the UNICEF strategy is to teach women and children to be responsible for their own food supply.

tronic media internationally. In Europe and North America, the front pages and editorial columns of several major newspapers featured the report, and it was widely covered by BBC television and radio and Radio France Internationale, among others. Coverage in Africa, Asia and Latin America was also extensive.

The Progress of Nations was skilfully used as an advocacy document around the world. For example, in Nigeria, at a ceremony marking the report's release, various speakers from the Government and the universities explained the implications of different data on Nigeria's human development efforts, emphasizing the need to establish appropriate mechanisms for data collection and analysis. In Albania, despite scarce resources and virtual lack of data on the country, UNICEF was able to enlist the participation of the Dean of the School of Journalism as well as parliamentarians, poets and other eminent Albanians to advocate on behalf of Albanian children.

And in Italy, the report was presented to a joint extraordinary session of the Commission for Social Affairs and the Commission for Community Politics of the Italian parliament. This was the first time in history that an international agency presented a report inside the parliament.

Media interest in what is to be an annual UNICEF accounting of political will towards children was supported by workshops, media briefings and other events organized by UNICEF offices, National Committees and NGOs globally, and by the advance distribution of 127 national summaries and data sheets highlighting individual country advances or deficiencies, and the high social and economic cost of ignoring children's needs.

THE STATE OF THE WORLD'S CHILDREN

THE mutually reinforcing effects of poverty, rapid population growth and the degradation of rural and urban environments were the main focus of *The State of the World's Children 1994* report. The report, published at the end of 1993, was launched in all of the world's major cities on 21 December to an extraordinarily receptive media and political audience.

Among national leaders pledging their commitment to invest in children's health, nutrition and education was United States President Bill Clinton, who extended an unprecedented invitation to UNICEF to launch the report at the White House. "If we let the world's children suffer, we know that in time we'll reap a bitter harvest of despair and desperation and violence," he said. "We know that when children grow up healthy and nurtured, they're more likely to do

better by their own children; they're more likely to become citizens and contributors."

Each year, *The State of the World's Children* looks beyond headline news to explore changes that affect large numbers of children in every region of the world. The current report argues that poverty, population growth and the environment — "the PPE problem" — present a compelling and complex challenge to the international community.

To find a new path to progress that meets minimum human needs, stabilizes and even reduces population levels and ushers in sustainable development will require, the report argues, "all the technological ingenuity, managerial capacity and political acuity that national societies and the international community can command."

While recognizing that some of the most common causes of infant and child mortality and disability are in retreat, the report places further progress in the areas of health and nutrition in the context of unsustainable demands on the earth's resources by production and consumption patterns in the industrialized countries that have brought many benefits, but have also "pushed the tolerance of the biosphere close to breaking point."

"Such a state of affairs cannot long continue, both because the industrialized world's levels of consumption and pollution are in themselves unjust and unsustainable, and because the other four fifths of the world cannot reasonably be expected to restrain or modify the course of its own development in order to protect the biosphere while the industrialized nations continue to monopolize the earth's capacity to provide and to absorb."

Noting the positive impact of poverty reduction, improved child survival, and education on family size in poor communities, the report suggests four basic investments to reverse the downward PPE spiral. They are:

» the prevention of common diseases and disabilities and a steep reduction in both severe and moderate malnutrition;

» rapid progress towards at least a primary education for all children and especially for girls;

» an unprecedented worldwide effort to improve the health, education, status, choices, rights and opportunities of women in poor communities;

» the provision of family planning information and services to all who need them.

The report also examines the impact of war on children in the 1990s and the alarming erosion of human ethics that has led to the recruitment of children into armies and the deliberate targeting of children by military forces as a way of terrorizing their enemies.

The report's release, occurring simultaneously in more than 100 countries, generated intense interest in all major international media and in some cases had special poignancy. The half-hour presentation in Sarajevo underscored the terrible vulnerability of children to the horrors of war, with 15 mortar shells exploding during the ceremony.

And in South Africa, the first-ever release of *The State of the World's Children*, hosted by Archbishop Desmond Tutu in Cape Town, drew the nation's attention and brought hope to the young beneficiaries and future architects of a free land.

FACTS FOR LIFE

EXPERIENCE in community development and adult education has shown that people learn and respond most readily to information when it is of immediate practical use. It is small wonder, then, that easily understood facts and instructions on child health care and development should have

Learning in the street: A store owner holds informal classes for a group of neighbourhood children.

UNICEF/5396/Isaac

UNICEF/93-1028/Press

Open-air schoolroom: UNICEF workbooks in hand, men and women, some with their babies, attend an evening adult education class under the trees.

struck a common nerve in poor communities where knowledge of immunization, ORT or good nutrition can yield dramatic, life-saving results.

Few, however, could have anticipated five years ago that the UNICEF advocacy booklet, *Facts for Life*, would achieve a circulation approaching 10 million copies, with editions printed in some 180 languages. The second edition, printed in 1993, contains an additional chapter on early childhood development, and original co-publishers UNICEF, UNESCO and WHO were joined by UNFPA.

Facts for Life is being used in innovative ways across the developing world. In Bolivia, Myanmar and many other countries, it has found a natural multiplier in prime-time media. In Nigeria, it is reproduced in comic books and as a weekly newspaper comic strip. In Guinea, a national ballet company and a theatre troupe have used its messages to entertain some 50,000 people. In India, 400 song and dance troupes in the State of Uttar Pradesh (population 100 million) have carried health care and child development messages into more than 700 village communities. The Bolivian army uses the book to prepare conscripts for parenthood.

In Sao Tome and Principe, the Sudan, Swaziland and Viet Nam, *Facts for Life* is a vehicle for women's education, and in Cameroon, Côte d'Ivoire, Ghana, Indonesia, Mozambique, the Philippines, Sri Lanka and Zaire, the publication has been embraced by religious groups that have linked it with Buddhist, Christian and Muslim teachings on child care.

Democracy movements in Eastern Europe and Central Asia have also provided fertile ground for the publication. Its central message, that parents have the ability to take charge of most child health care needs, has found a receptive audience in countries like Romania, where the passing of rights and responsibilities from the State to the individual is at the heart of the democratic transition.

During the past year, the most spectacular growth of *Facts for Life*, however, was recorded in Brazil, where alliances were developed with two trade associations. ABIGRAF, the Brazilian Association of Print Shops, printed 1 million copies, and SEBRAE, the federation of micro- and medium-size enterprises, agreed to handle the distribution and support training based on the material. Brazilian broadcasters signed on for the first round of training, which was funded by the Netherlands Committee for UNICEF.

NEW INITIATIVES

◆ FEATURES SERVICE: Launched in November 1992, the Service distributed 76 human interest stories submitted by 35 countries from all UNICEF regions. The features present the human side of development and describe how UNICEF programmes improve people's lives.

These stories appeared in National Committee publications and were transmitted by three news services for use in newspapers in industrialized and developing countries. Numerous mainstream newspapers in Africa, Asia and North America published UNICEF features.

◆ SPEAKERS NOTES: The planned series of 30 'Notes' will summarize UNICEF policy and provide supporting statistics and quotations to help people working on speeches, press releases or articles and to brief the media.

The first seven 'Notes', distributed to field offices and National Committees in early 1994, covered the World Summit and mid-decade goals for children, working children, child prostitution, nutrition, the girl child, female genital mutilation and family planning.

COMMUNICATION PROJECTS

INTERNATIONAL CHILDREN'S DAY OF BROADCASTING

UNICEF'S second annual International Children's Day of Broadcasting (12 December) was remarkable not only for its expansion from 80 participating countries in 1992 to 108 in 1993, but also for the enthusiasm with which individual stations and networks tackled the assignment. In 1992, the majority of stations involved in the Day aired materials produced by UNICEF. In 1993, stations in more than 70 countries produced special programmes of their own and used the Day to examine issues concerning children locally and regionally. UNICEF also provided audiovisual materials for the Day to radio and television stations in more than 88 countries.

Some stations devoted a full day to child-related programming while others gave several days or a week, as in the case of Poland. Individual approaches to programming were as diverse as the topics explored. Child broadcasters hosted their own programmes, read the news and appeared in shows. There were debates and round-table discussions on children's issues, cartoons and quizzes, telethons to raise money for child-related causes, concerts and music festivals, live press conferences with children as guests, talk shows and sitcoms, documentaries, features, interviews and music videos with songs specially recorded for the Day. BBC Radio 5 did a live radio satellite hook-up with Radio Somalia, and the BBC Latin America Service did the same through radio stations in Bolivia, Mexico and Paraguay.

"Adults don't really understand a bit how children feel," said one young girl from Barbados in a radio spot produced by UNICEF. For the tens of thousands of adults who tuned in to the Day's broadcasts, it was a chance to listen to children express themselves on such issues as love, war, play, dreams, feelings, education, pollution, the environment, abuse and neglect.

UNICEF/Lemoyne

UNICEF supports education for girls in remote areas. Basic literacy and numeracy is their passport to a better life.

GLOBAL COMMUNICATION SUPPORT FUND

IN this age of high technology, more and more people have access to television and other modern equipment. Satellites beam programmes to remote villages and computers work on solar power in the desert. These new developments provide unique opportunities for mobilization and advocacy. However, country programme budgets cannot be stretched to cover innovative, broad-scale projects. A Global Communication Support Fund (GCSF) was therefore established by the UNICEF Executive Board in 1990.

The Fund's purpose is to provide seed money for pilot communication projects that support UNICEF programme goals, serve as models and have a broad geographical impact. The Fund operates on a biennium budget, which in 1994–1995 amounts to US$800,000 in general resources and US$1.2 million in supplementary funds.

Projects undertaken so far are rich in diversity. In 1993, work continued on large-scale projects, such as *Plaza Sésamo* (a Spanish-language version of the children's television series, *Sesame Street*) and *Meena* (an animated film series on issues concerning girl children in South Asia), while new projects launched included training for journalists in human development reporting.

The *Plaza Sésamo* project involves the production of 130 half-hour programmes for children

UNICEF/93-0684/Romeo

UNICEF supports many programmes to bring essential services to the children of economically depressed areas.

aged three to six by Televisa, Mexico's largest television company. By participating in the curriculum development, UNICEF assures that programmes will include suitable *Facts for Life* and life skills messages for young audiences. The programmes, which will begin broadcasting in Mexico in mid-1994, will be made available to 18 Latin American countries. UNICEF Mexico City is also developing related materials for outreach programmes for use by Latin American country offices in their programme activities.

Funding for this project was provided through GCSF by the Netherlands and United States Committees for UNICEF.

Another ambitious project that made notable headway in 1993 was the *Meena* series.

After successfully field-testing the first episode, 'Count Your Chickens' (on the need for girls to attend school), UNICEF Bangladesh went ahead with plans for several new episodes. The second episode, 'Dividing the Mango' (on nutrition and gender discrimination), has also been completed. The series is a co-production of UNICEF offices in Bangladesh, India, Nepal and Pakistan and a Bombay animation studio. The episodes are shown on television, in cinemas and video clubs, and are made available to grass-roots groups for non-television audiences. They are accompanied by comic books, posters and other materials. Funds for the first six episodes were donated by the Norwegian Government.

In Ecuador, work continued on the development of an animated health spot, with the support of the Walt Disney studios. The collaboration with Disney has proved to be a valuable training exercise for the Ecuadorian animation team.

Film producers in nine countries in different parts of the world created films on development issues as part of a project on local perspectives on development. Almost completed, the nine 15-minute films cover a variety of development themes, including education and gender disparity in rural Mexico, adolescent mothers and street children in Nairobi, schooling for girls and women in Thailand, and street girls and prostitution in Nicaragua.

◆ TRAINING: A training programme for developing country journalists in reporting on development issues was successfully pilot tested in Kathmandu in September, with the collaboration of the Nepal Press Institute. Twelve middle-level practising journalists from six South Asian countries attended the three-week course, which was developed and run by. The Thomson Foundation of the United Kingdom. The course manual will be made available to UNICEF field offices, in the hope that they will be able to organize similar courses in their own countries.

A joint FAO-UNICEF rural radio training project culminated in November in a training of trainers workshop in Ouagadougou for rural radio producers from seven francophone West African countries. Participants tested and revised the training manual, which will be made available to broadcasting stations as well as to FAO and UNICEF offices in the region.

A third training programme on managing audiovisual communication was pilot tested in Amman in November. The course, developed for UNICEF by the Radio Nederland Training Centre and the Australian Broadcasting Corporation, was attended by 24 participants from 13 countries in the Middle East and North Africa.

PRODUCTIONS AND CO-PRODUCTIONS

AMONG the UNICEF electronic media productions during the year were: *Raised Voices*, a 30-minute documentary on the way children feel about the day-to-day issues affecting their lives; two videos on Audrey Hepburn, including a memorial tribute; and a video on the third anniversary of the World Summit for Children. A one-hour video, *Growing Up*, was co-produced with Central Television and Television Trust for the Environment (UK) with narration by Roger Moore. It traces the lives and prospects of 10 healthy babies born in 10 unequal parts of the world.

ADVOCACY IN THE FIELD

IN virtually every UNICEF office in every region advocacy and information activities were important priorities.

In Mexico, strong ties with the national television system meant extensive coverage, via satellite hook-up, of the International Colloquium of Mayors as Defenders of Children in Mexico City in July. In Brazil, the broad-based coalition 'Pact for Children' continued its successful mobilization on behalf of children, with UNICEF as executive secretariat. Documentaries and videos, such as *Es Justo* (*Is it fair?*) and *World Mobilized for UCI*, were produced and aired throughout the region. In Belize, an innovative puppet theatre project explored child rights, and in Bolivia, the manager of the national football team promoted ORS in television and radio spots.

Indonesia achieved unprecedented coverage of children's and women's issues in the print media: 3,200 stories — an average of around nine per day — were published. Two channels of the National People's Radio of China, reaching an audience of 900 million, broadcast a campaign on health issues, based on NPA goals and the Convention on the Rights of the Child.

The plight of bonded child workers made headlines in India, and one of the country's best-known producers, Saeed Mirza, made a film on universal primary education that was broadcast nationally during the Education Summit in New Delhi in December. Radio Pakistan launched a weekly feature programme on issues related to children and women, and the UNICEF office organized a workshop for editors of children's magazines, to encourage them to broaden their coverage of children's health and development issues.

The West Bank and Gaza Strip office produced a video entitled *A Room in the Ruins*, highlighting the special problems of Palestinian children and women. Child survival and development issues were woven into the scripts of popular radio series in Egypt, Iraq, Syria, Turkey and Yemen.

In Africa, the UNICEF office in Kenya presented a display on the Bamako Initiative at its first-ever booth at the country's annual agricultural show. The Day of the African Child generated numerous articles and events across the continent, including a series of feature articles on children in the Gambia's leading daily and weekly newspapers, which also highlighted World Breastfeeding Week. In Burkina Faso, the office produced four short films on girls' education, breastfeeding and other UNICEF issues. In Nigeria, a major radio and television series, entitled *Let Them Live*, was produced, based on the publication, *Facts for Life*. Across the continent child-related topics on AIDS and breastfeeding were aired in Ethiopia, Liberia, Mauritania, Mauritius, Namibia, Zambia and Zimbabwe.

UNICEF/Lemoyne

Keeping the promise to children: UNICEF assists governments to improve children's lives through better health, nutrition and education.

WORKING TOGETHER

UNICEF/5803/Hartley

NATIONAL COMMITTEES

THE general public the world over is an essential part of the UNICEF family. This bond, forged in 1946, has endured to this day, making UNICEF unique in the United Nations system. In 34 industrialized countries worldwide, National Committees provide the crucial link with this vital part of the UNICEF family.

National Committees are invaluable allies, helping to generate deeper understanding of the basic needs and rights of children as well as financial support for the organization's objectives. In 1993, approximately one quarter of the UNICEF overall budget was contributed through the Committees. These unique groups have expanded their activities on behalf of children far beyond the traditional sale of gifts and greeting cards.

During the year, the Convention on the Rights of the Child and the World Summit for Children continued to influence the work of a number of National Committees. Those milestones for children have given a much higher profile to child advocacy in all countries and have created a clear framework within which Committees can work.

Several Committees have been instrumental in their nations' signing and ratification of the Convention, and some have been called on to help their Governments monitor its observance. In addition, several more have become involved in education and information activities related to child rights.

The goals of the World Summit are also being integrated into the work of National Committees, which are raising public consciousness and funds nationally and reaching out globally to the children in greatest need.

Direct involvement by Committees in national child-related issues has helped to extend the UNICEF network of partners. As part of their advocacy for breastfeeding through BFHI, some Committees established relations with medical institutions, professional organizations, related NGOs and consumer groups. The substantive role Committees are playing in such efforts has in turn increased their stature and credibility within their own nations.

Some National Committees also expanded their support base in 1993 by working with municipalities, through the initiative of mayors as defenders of children. Others strengthened or formed ties with NGOs, religious leaders, parliamentarians and others to pursue the priority goals of the Summit and the Convention.

Issues related to children in war have remained high on the agenda during the past year. Several Committees raised funds directly for children affected by the conflicts in Somalia and former Yugoslavia. They collected and published information on the issues and held conferences and other events to raise public awareness. When National Committees gathered in Athens in May for their annual meeting, they took the unprecedented action of denouncing the deliberate targeting of children during armed conflict, in a joint statement to international media.

National Committees were also active in combating the rising levels of ethnic and religious intolerance in so many nations. To achieve the understanding and tolerance among youth vital to a peaceful future, National Committees are exploring innovative means of advocating for the harmonious coexistence of future generations. For example, a major event held in Hamburg in early 1993 brought together artists, social activists and the German Committee for UNICEF for two days of discussion and performances on the subject of intolerance. And the United Kingdom Committee is collaborating with British NGOs to produce an education package on conflict resolution.

Information and advocacy activities have been a part of the National Committees' mandate since UNICEF began. Information officers for the Committees help to mobilize media, establish ties with institutions and give child-related issues

The Convention on the Rights of the Child mandates free and compulsory primary education for *all* children.

UNICEF/5-94/Goldsmith

UNICEF/Tsvetovyi

Education for Development: National Committees help set up school programmes that teach awareness of global interdependence and peace.

high visibility in their countries. They send teams of reporters and celebrities to see UNICEF programmes at work and tell the stories of development struggles and successes to those with the potential to help.

In October, information and communications officers from 22 National Committees met in Bangladesh with headquarters staff for an information workshop, in order to streamline collaboration with the secretariat. The workshop, which followed field trips to eight Asian countries, focused on the situation of the girl child in the region.

Committee specialists also came together in 1993 for two first-time encounters: an Education for Development workshop and a private sector fund-raising workshop. In the latter case, Committee professionals dealing with greeting cards met to refine global coordination and share marketing strategies needed in the increasingly sophisticated and demanding world of fund-raising.

Four newcomers — Latvia, Lithuania, the Republic of Korea and Slovakia — brought the number of Committees officially recognized by UNICEF in 1993 to 34. UNICEF recognizes only one entity in any country to act on its behalf, and care is taken to ensure that Committee members represent a broad spectrum of each society.

UNICEF was in contact with government officials, local NGOs and other partners in a number of countries including the Czech Republic, Estonia and Slovenia with a view to creating National Committees; similar discussions were planned elsewhere, including in Belarus and Ukraine.

One of the vital forces that keeps UNICEF close to its public in the industrialized countries is the volunteers who work for the National Committees *(see following box)*.

VOLUNTEERS

More than 100,000 volunteers give their time and talents to the needs of children through UNICEF National Committees in industrialized countries.

Volunteers raise funds for UNICEF, organize campaigns, teach in schools and universities, run UNICEF gift shops and advocate the cause of children with government leaders and elected representatives. More well-known volunteers, in their role as Goodwill Ambassadors, frequently capture enormous audiences. Sir Peter Ustinov once said there was no joy quite like that of being a volunteer for UNICEF, and according to the late Audrey Hepburn, "Alone we can do nothing; together there is nothing we cannot do."

Some National Committees started working with volunteers, sometimes called 'Friends of UNICEF', four decades ago and have developed volunteer networks with thousands of members reaching deep into every community.

Although this human resource is essentially free to UNICEF, it is increasingly managed just as professionally as the capacities of paid staff. Many Committees have developed 'volunteer positions' for which people are recruited according to the skills needed. Operating this resource requires a deep and long-term commitment.

However, the returns can be extraordinary. According to a 1991 analysis, one Committee invested US$150,000 in its volunteers in the year that those volunteers raised US$8.2 million for UNICEF. Another invested US$30,000 in volunteers who raised US$800,000.

Volunteers are also valuable insurance against the vagaries of the economy and modern fund-raising. They are available for advocacy and other work in their communities when direct-mail responses decline or computers break down.

National Committees are very conscious of the need to remain in step with new challenges and new generations of supporters. The Convention on the Rights of the Child has emerged as an attractive rallying point for youth and has given UNICEF Committees a timely opportunity to increase their support base.

The professional approach by Committees to volunteer development has helped to increase the UNICEF volunteer network in the industrialized world by some 25 per cent over the last three years.

NON-GOVERNMENTAL ORGANIZATIONS

INTERNATIONAL and national NGOs are indispensable for UNICEF's work because they play a crucial role in advocating for children's concerns. In 1993, as a result of advocacy and fund-raising efforts, NGOs contributed $18.3 million to support UNICEF-assisted programmes.

Kiwanis International announced a global fund-raising campaign for UNICEF in 1993 for the virtual elimination of IDD by the year 2000. Kiwanis is mobilizing its more than 330,000 members in over 80 countries, as well as 210,000 university and high-school students who are members of its Circle K and Key Clubs, to help reach the goal.

Junior Chamber International renewed its commitment to the mid-decade goal of increasing usage levels of ORT to 80 per cent and launched a campaign to raise funds for UNICEF-supported water projects in selected countries (*see also* '*Control of diarrhoeal diseases*'). Quota International provides support for the UNICEF ORT programme in Bhutan, and has raised funds for the UNICEF immunization project in Uganda.

Rotary International continued its efforts to eradicate polio by the year 2000 and keep the world aware of, and committed to, that goal. Rotary clubs are also supporting Education for All, with special emphasis on basic literacy and education for girls.

Partnerships with national and international NGOs have been central to UNICEF promotion of breastfeeding. La Leche League International, the International Baby Food Action Network (IBFAN), the International Lactation Consultant Association, the International Confederation of Midwives, the International Council of Nurses and the World Alliance for Breastfeeding Action (WABA) have all shown vigorous support for BFHI around the world.

These groups organized training programmes for health professionals on lactation management and assessment procedures, worked to convince hospitals to adopt practices conducive to breastfeeding and monitored industry compliance with government action to end the distribution of free or low-cost breastmilk substitutes in hospitals and maternity centres.

A regional training seminar on the International Code of Marketing of Breastmilk Substitutes for participants from countries in Central and Eastern Europe was also organized by IBFAN in Prague in May.

The Convention on the Rights of the Child is attracting the dedicated support of a growing number of NGOs, involved in promoting its ratification, implementation and monitoring (*see* '*The Convention on the Rights of the Child*'). Among them, Defense for Children International (DCI) and Rädda Barnen are working with UNICEF and other United Nations agencies and NGOs to develop a child rights information network. The Geneva-based NGO Group on the Convention is helping to develop national NGO coalitions to raise public awareness of the Convention as well as to monitor its implementation.

The NGO Committee on UNICEF organized a consultation in March in New York to increase support for the Convention among other United Nations agencies, and in November, with support from local UNICEF offices, it organized a Central American conference entitled 'Advancing the Rights of Children: Call to Action for NGOs'. Since all Central American countries have ratified the Convention, the challenge now is its implementation and subsequent monitoring. As a result of the conference, the number of NGOs working on these two issues has increased. The meeting also heightened awareness of the importance of working with — and not just for — children and indigenous peoples. Joint NGO national plans of action were also developed.

NGOs were active during the year in their support for the family as the most important environment for healthy child development. At the NGO World Forum on the International Year of

Partnerships with NGOs are the cornerstone of UNICEF efforts to achieve universal immunization of children.

UNICEF/93-1104/Fennell

BEST COPY AVAILABLE

UNICEF/Lemoyne

NGO support for breastfeeding is crucial to the success of the baby-friendly hospital initiative.

the Family (1994), held in Malta in November, UNICEF's key NGO partners organized workshops on some of the main priorities. The NGO Committee on UNICEF focused on substitute families, DCI on child rights, WABA on women's work and breastfeeding, and Baha'i International on strengthening the role of fathers in child care.

During the year, UNICEF improved its coordination with, and assistance to, NGOs working in Central and Eastern Europe. Joint activities revolved around the exchange of information and experiences, capacity-building for local NGOs, and the promotion of 'children first'.

The cooperation bore results. A Directory of NGO Projects for Children in Central and Eastern Europe was created (with the United Nations Non-governmental Liaison Service), and an international consultation on 'Environment and Development: First Call for Children' was organized in Warsaw in March.

At the request of a number of governments in the region, UNICEF also worked with national NGOs to develop appropriate legal and other mechanisms regulating adoption practices, to ensure that the best interests and the rights of children in such cases are adequately protected.

Efforts were made during the year to reactivate and redefine the purpose of the Consultative Group of Youth NGOs, created at the time of the World Summit for Children. The Group has 18 member organizations, 13 of which are based in Europe. UNICEF also took steps to establish links with European institutions, including the Council of Europe and the European Commission, which are active in the field of youth and children's programmes, with a view to exchanging information and coordinating activities in Central and Eastern Europe.

Direct contributions to UNICEF from NGOs in 1993 totalled US$18.3 million, including US$12.5 million from Rotary International, US$2.4 million from the International Development Research Centre (Canada), and US$465,000 from the Van Leer Foundation (Netherlands).

INTERGOVERNMENTAL ORGANIZATIONS

ADVOCACY with intergovernmental organizations (IGOs) during the year was successful in bolstering high-level political commitment to NPAs, the mid-decade goals and the Convention on the Rights of the Child.

In March, the Ministerial Council of the Organization of the Islamic Conference, meeting in Karachi (Pakistan), strongly endorsed the mid-decade goals and urged ratification of the Convention by all member States. In June, the Council of Ministers and the Heads of State and Government of OAU committed themselves to the mid-decade goals and universal ratification of the Convention in the Consensus of Dakar, also later endorsed by the Francophone Summit in Mauritius in October.

The Commonwealth Heads of Government, meeting in Cyprus (also in October), dealt with a number of issues of concern to UNICEF, including the well-being of children, and called for governments to take clear action to achieve the mid-decade goals and to ratify and implement the Convention. In December, the Group for South/South Cooperation (known as G-15) endorsed the mid-decade goals and universal ratification of the Convention. Similar commitments were made by other IGOs, notably SAARC, the South Pacific Forum and the Ibero-American Conference of Heads of State and Government.

The IGO conferences provided valuable openings for advocacy with individual Heads of State and Government. The Executive Director had substantive meetings with leaders at the OAU, Commonwealth and G-15 summits, and the Deputy Executive Director, External Relations, met individually with francophone Heads of State in Mauritius. Similar meetings were held during the United Nations General Assembly, the third anniversary of the World Summit for Children commemoration (New York, September) and the Education for All Summit (New Delhi, December).

GOODWILL AMBASSADORS AND CELEBRITIES

UNICEF paid homage to the late Goodwill Ambassador Audrey Hepburn at the United Nations on 30 April. Special Representative Roger Moore hosted the memorial ceremony, which included music and tributes by Harry Belafonte, Hugh Downs, Henry Mancini, Cicely Tyson and Barbara Walters. Gregory Peck and Elizabeth Taylor reminisced about Ms. Hepburn on videotape, and there were performances by 20 well-known classical and popular music personalities. The event also launched the Audrey Hepburn Memorial Fund, which will support UNICEF-assisted programmes in Ethiopia, Somalia and the Sudan.

Sir Peter Ustinov's 25-year commitment as Goodwill Ambassador for UNICEF was also celebrated by UNICEF in Geneva and by the United Kingdom and Canadian National Committees. In July, Sir Peter completed a two-week mission to the Russian Federation, where he visited schools, hospitals, shelters and child care facilities in five cities, meeting with children adversely affected by the country's political and economic transition. A television film of the mission was made to help build awareness of the situation facing children in the Russian Federation today. Sir Peter also participated in a concert for Bosnia and Herzegovina in Salzburg (Austria), in a concert in London, along with Mr. Moore, and at a benefit, with Sir Edmund Hillary, in Toronto.

Goodwill Ambassador Liv Ullmann tied successful benefits and press engagements for National Committees to the opening of her film *Sofie* in Brussels, Toronto and Puerto Rico. While participating in the Johannesburg Film Festival, she met with Nelson Mandela and gave a press briefing on UNICEF programmes, organized by UNICEF Johannesburg. To support emergency programmes for former Yugoslavia, Ms. Ullmann recorded television and radio appeals for the protection of children and authored a fund-raising letter to be used by UNICEF National Committees.

Goodwill Ambassador Tetsuko Kuroyanagi continued her successful fund-raising and advocacy through Japanese television. In early December, she visited UNICEF-assisted programmes in the Sudan.

Mr. Moore had a particularly active year, participating in UNICEF-related activities in Los Angeles and Chicago, and at the Kiwanis World Congress in Nice. He made two appearances for the 'Hamburg for UNICEF' campaign in Germany and taped campaign appeals for National Committees in Canada, the Netherlands and Sweden.

UNICEF/93-0659/Mera

On the Day of the African Child, Goodwill Ambassador Harry Belafonte addressed the audience gathered at UNICEF House for the celebration.

Mr. Moore also took part in the concert initiative 'Artists against Racism and Violence', organized by Vanessa Redgrave, in Hamburg. Ms. Redgrave took the programme to Manchester (United Kingdom) and former Yugoslavia, where the December concert carried the message, 'Wake Up World — Put Children First'.

Gina Lollobrigida presented UNICEF media awards in El Salvador, Guatemala, Honduras and Panama and also participated in a 'Golden Europe' television special in Germany. Special Representative Renato Aragao and other artists participated in the 'Children and Hope' campaign in Brazil.

The popular Greek singer Nana Mouskouri was appointed UNICEF Special Representative for the Performing Arts in October. She visited UNICEF-assisted projects in Mexico and began her support activities in Canada, France and Greece.

UNICEF/93-0979/Comi

Singer Nana Mouskouri is UNICEF's latest advocate for children worldwide.

RELIGIOUS LEADERS

LEADERS of the world's religious faiths provided important advocacy for children. In conferences and meetings, religious services and publications, they promoted humanitarian assistance for women and children in emergency situations, and for health initiatives, such as ORT and immunization. For the Day of the African Child they jointly planned inter-faith services in every region to help call attention to the special needs of Africa's children.

A conference for Asia and the Pacific, sponsored by the World Conference on Religion and Peace and the Australian Committee for UNICEF, was held in Melbourne in August under the banner 'Keeping the Promise'. More than 100 participants representing eight religions and indigenous traditions from 14 countries discussed ways in which religious leaders and people of faith could work towards implementing the Convention on the Rights of the Child and the mid-decade goals for children.

UNICEF/5405/Thomas

The Day of the African Child was celebrated with interfaith services in every region.

A Vatican-sponsored conference entitled 'The Child Is the Future of Society' (Vatican City, 18–20 November) drew 6,000 participants, including health experts, religious leaders, scientists, celebrities and government representatives. Pope John Paul II addressed the meeting, urging countries to ratify the Convention and achieve the World Summit for Children goals.

96

PARLIAMENTARIANS

WORLDWIDE support by parliamentarians has been essential in placing and keeping UNICEF's concerns high on national agendas. Parliamentarians have provided vital assistance on many issues, notably the global campaign for universal ratification of the Convention on the Rights of the Child by 1995.

UNICEF/5822/Hanley

A global campaign aimed at universal ratification of the Convention on the Rights of the Child by 1995 has been aided by parliamentarians worldwide.

During 1993, international parliamentary groups such as the Inter-Parliamentary Union (IPU) addressed children's issues at their global meetings.

The 89th Inter-Parliamentary Conference (New Delhi, 11–17 April) adopted a resolution on the need for universal primary education and called on parliaments in wealthier nations to help developing countries in this effort.

In Budapest (19–21 March), a parliamentary workshop, entitled 'Surviving Transition: Social Welfare Safety Nets for Children and Vulnerable Families', drew 51 participants, including parliamentarians from 12 of the Central and Eastern European countries and the newly independent States.

The workshop, organized by IPU and UNICEF, discussed new social policy objectives during transition, including social welfare legislation and social safety nets. It adopted a statement reaffirming support for the Convention on the Rights of the Child and the World Summit Declaration

and Plan of Action and promising to advocate for their implementation.

In Kyoto (Japan), more than 300 spiritual leaders, parliamentarians and others discussed the importance of changing social values for global survival.

UNICEF and the Social, Health and Family Affairs Committee of the Parliamentary Assembly of the Council of Europe held a hearing in Geneva (24 June) on the situation of women and children in former Yugoslavia. On 29 June, the Committee on Legal Affairs and Human Rights of the Council of Europe, meeting in Strasbourg (France), invited UNICEF to give details of its programmes of assistance in former Yugoslavia.

As a result of the hearings, the Council of Europe passed a resolution and order on 28 September urging member and non-member governments to subscribe to the principle of 'first call for children' and to ratify the Convention on the Rights of the Child. The Social, Health and Family Affairs Committee was asked to develop, in cooperation with UNICEF, a European strategy for children.

Parliamentarians in Central America maintained a close alliance with UNICEF in promoting several initiatives including the establishment of NPAs, the ratification of the Convention on the Rights of the Child and the universal iodization of salt to combat IDD.

In Brazil, a parliamentary coalition for children was established to protect the rights of children and adolescents, to guarantee financial resources for children and to mobilize Brazilian society in favour of child development and the goals of the World Summit for Children. In the Gambia, a three-day workshop organized by the parliamentary-media child survival and development (CSD) task force recommended that the provisions of the Convention on the Rights of the Child and the Africa Charter on the Rights and Welfare of the Child be incorporated into national legislation and school curricula.

MAYORS

LOCAL government support for children continued to grow during the year. At the Second International Colloquium of Mayors, Defenders of Children (Mexico City, July), hosted by the Mayor of Mexico City and UNICEF, 80 mayors and officials from cities in 45 countries discussed problems and shared experiences in creating a more supportive environment for urban children (*see also 'Urban basic services'*). The mayors and municipal leaders who were present also expressed support for NPAs. The Colloquium's final Declaration and Plan of Action called on municipal leaders worldwide to join this effort.

In the extensive follow-up to the Mexico meeting, participants shared the Colloquium's Declaration and Plan of Action with other mayors, the media and groups in their countries. Regional meetings were held in Quito (November) for Latin American mayors and in Freetown (November-December) for mayors from West African capitals.

National meetings of mayors were held in Argentina, Bolivia, Cameroon, Chile, Colombia, the Dominican Republic and Thailand. A meeting of Spanish mayors (Pamplona, October) focused on the needs of both Spanish children and children in developing countries. The conference approach, which included an emphasis on Education for Development, was expected to become a model for mayors in other industrialized countries in organizing similar gatherings.

Municipal plans of action for children were developed in cities in Bangladesh, Bolivia, Colombia, Ecuador, Kenya and Senegal. Mayors in a number of countries, including Cameroon and Pakistan, also promoted immunization coverage and increased ORT use.

UNICEF/5233/Toutounji

The needs of the children in cities are getting increasing attention from the world's mayors.

BEST COPY AVAILABLE

RESOURCES

UNICEF/Lemoyne

UNICEF FINANCES

INCOME

UNICEF derives its income from voluntary contributions from governmental and non-governmental sources.

Total income for 1993 was US$866 million (compared to US$938 million for 1992). This includes US$170 million in contributions for emergencies (US$204 million in 1992) and $509 million from general resources.

Contributions from governments and intergovernmental organizations accounted for 68 per cent of total income (75 per cent in 1992), and the rest came from non-governmental sources and other income (see pie chart below). For estimated governmental and non-governmental contributions by country, see pages 106 through 108.

The 1993 income was divided between contributions for general resources (59 per cent), supplementary funds (21 per cent) and emergencies (20 per cent).

General resources are available for cooperation in country programmes approved by the Executive Board, as well as programme support and administrative expenditures.

General resources income includes contributions from 98 governments; net income from the sale of greeting cards; funds contributed by the public (mainly through National Committees); and other income.

UNICEF also seeks supplementary funds contributions from governments and intergovernmental organizations to support projects for which general resources are insufficient, or for relief and rehabilitation programmes in emergency situations, which, by their nature, are difficult to predict.

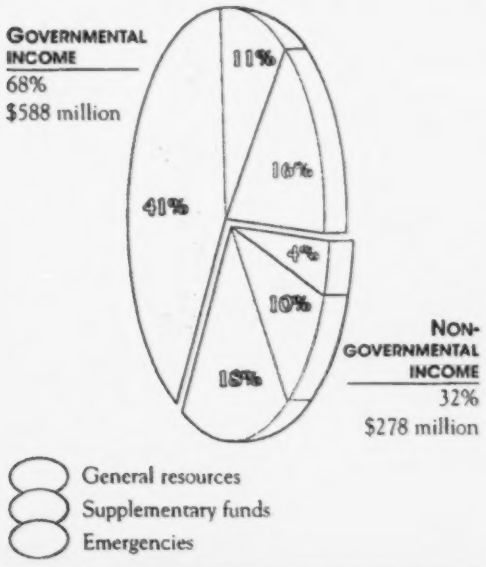
Contributions to supplementary funds from intergovernmental organizations

(in thousands of US dollars)

African Development Fund	1,000.0
EEC	10,908.2
IDB	3,933.0
OPEC Fund	250.0
Total	16,091.2

UNICEF INCOME BY SOURCE 1993

Total income: $866 million



EXPENDITURES

THE Executive Director authorizes expenditures to meet recommendations approved by the Board for programme assistance. The pace of expenditure depends on the speed of implementation in any country.

In 1993, UNICEF expenditures amounted to US$997 million (1992 US$932 million), summarized in US$ millions as follows:

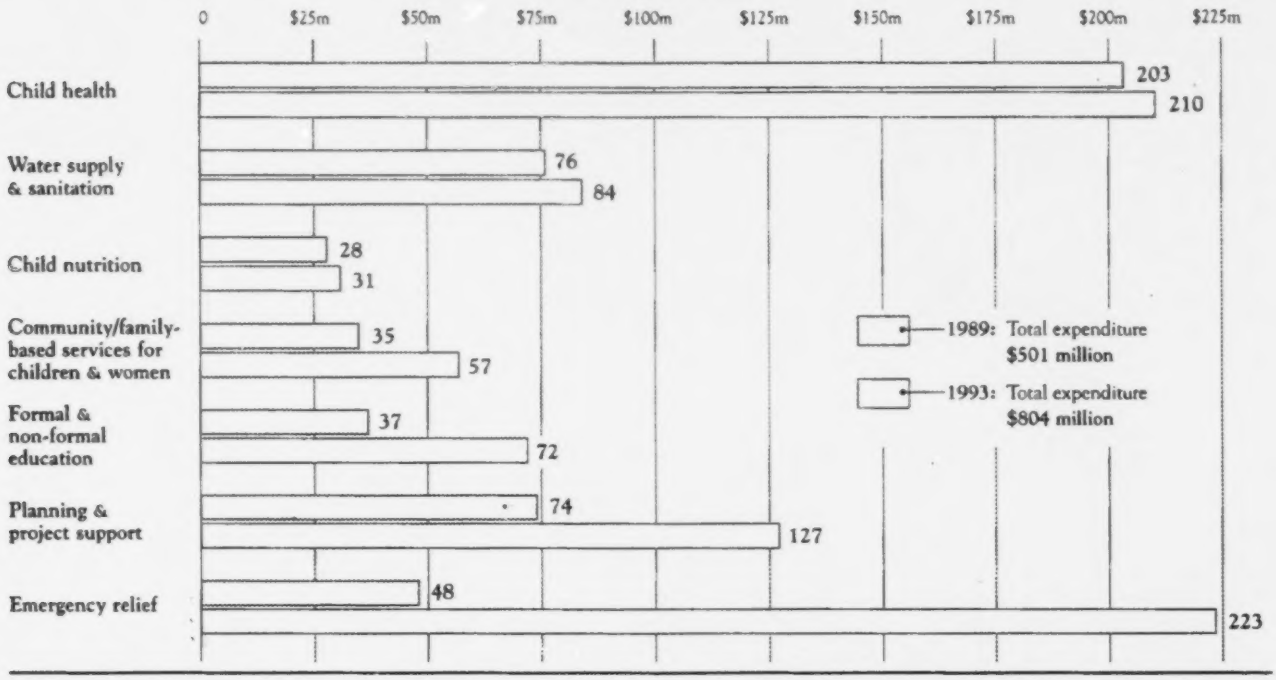
	1992	1993	1994 (est.)
Cash assistance	392	445	429
Supply assistance	352	359	346
Subtotal programme expenditure	**744**	**804**	**775**
Programme support	92	93	102
Administrative services	86	87	95
Write-offs and other charges	10	13	0
Total expenditures	**932**	**997**	**972**

The bar chart on page 100 shows programme expenditures by sector and amount in 1989 and 1993.

BEST COPY AVAILABLE

UNICEF EXPENDITURE ON PROGRAMMES BY SECTOR 1989/1993

(in millions of US dollars)



FUND-RAISING AND FINANCIAL PROSPECTS

GOVERNMENT spending cuts, a stronger US dollar and the results of the 1993 Pledging Conference suggest a reduction in total government contributions to UNICEF resources for 1994. Thirteen* major UNICEF donors did, however, increase or maintain their level of general resources contributions in national currencies and the hope is that contributions from all major donors will increase as the global economy works its way out of recession in 1994.

It is also hoped that government contributions for supplementary funded programmes will increase in 1994 to levels anticipated in the 1992–1995 medium-term plan.

In addition to income generated from the sale of products by Greeting Cards and Related Operations (GCO), UNICEF is encouraging the non-governmental sector, through National Committees and NGOs, to further increase its important contributions. The benefits of other forms of fund-raising are also currently being examined.

The medium-term plan set the pace for fund-raising during 1993 and special efforts were made to mobilize global resources for NPAs, particularly in Africa. Multilateral agencies, the World Bank and other development banks, the European Union and NGOs were encouraged to channel funding for NPAs through UNICEF.

* Australia, Belgium, Canada, Denmark, Germany, India, Japan, Netherlands, Norway, Republic of Korea, Saudi Arabia, United Kingdom and United States.

DEBT SWAPS

BY the end of 1993, UNICEF had assisted in conversion of debt in six countries: Bolivia, Jamaica, Madagascar, the Philippines, Senegal and the Sudan. The debt is converted in a variety of ways, according to the nature of the debt, but the essential feature is that the government concerned agrees to spend local currency on programmes for children rather than using its scarce foreign exchange to service the debt.

Since the programme first began in 1989, these conversions have generated local funds equivalent to a total of US$29.4 million, retiring US$110.3 million worth of debt. In 1993 alone, with the assistance of the National Committees

of Canada, Japan and the Netherlands, the initiative raised local funds equivalent to $18.8 million, a doubling of the 1992 figure of US$9.5 million.

The local funds supplement UNICEF's ongoing contributions to child survival and development programmes in such areas as basic education, women in development, primary health care and water and sanitation. UNICEF general resources are not used for debt conversions.

Recently a number of West African countries have requested assistance from UNICEF to assess their debt-stock and facilitate conversion into development programmes. This will be done in collaboration with UNDP and United Nations Conference on Trade and Development (UNCTAD).

1994 RECOMMENDATIONS

UNICEF currently supports programmes in 138 countries. At the second regular session of the Executive Board in 1994, proposals for new or extended multi-year programme cooperation in 58 countries will be submitted.

Assistance for the proposed new programmes would amount to US$329 million from UNICEF general resources and US$622 million for programmes deemed worthy of support if supplementary funds are forthcoming. The duration of the programmes ranges from two to six years.

Programme recommendations from general resources for all countries in which UNICEF cooperates, including those being proposed at the 1994 Executive Board second regular session, are shown in the table on page 102.

A financial medium-term plan covering the years 1994–1997 will also be submitted to the Executive Board.

UNICEF/93-1103/Pirozzi

UNICEF funding aids in building wells in rural areas, giving more people easy access to safe water.

BIENNIAL BUDGET 1994–1995

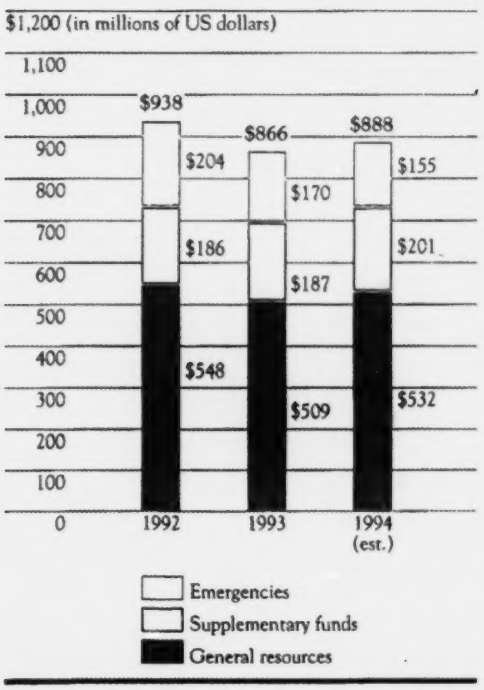
THE 1994–1995 administrative and programme support budget, which was approved by the Executive Board in 1993, endeavours primarily to implement the 1992 Executive Board decisions on improving the transparency and clarity of various budget documents and the organizational infrastructure to sustain programmes for children and women in the developing world.

In these budget proposals, the Executive Board approved the abolishment of core posts and the downgrading of other senior positions at New York headquarters with a corresponding increase of core positions in field offices to enhance the permanent capacity in the field. This included the upgrading of sub-offices to field offices, the establishment of new field offices and the strengthening of national capacity for enhancing sociocultural sensitivity in UNICEF-assisted programmes.

UNICEF takes pride in employing national officers of developing countries as the 'pillars' of its professional staff capacity in its field offices.

The 1994–1995 biennial budget represents an increase of 0.5 per cent per year in real terms over the 1992–1993 revised budget. Budgeted expen-

UNICEF INCOME 1992–1994



UNICEF cooperates in programmes in 138 countries: 46 in sub-Saharan Africa; 35 in Latin America; 34 in Asia; 14 in the Middle East and North Africa; and 9 in Central and Eastern Europe and Central Asia.

UNICEF programmes are approved for multi-year periods. Programme recommendations being proposed to the 1994 Executive Board session are indicated in colour and should be regarded as tentative until approved.

The UNICEF programme budget in each country is allocated according to three criteria: under-five mortality rate (U5MR) – the annual number of deaths of children under five per 1,000 live births; income level (GNP per capita); and the size of the child population.

Afghanistan	1995:	$5,500,000
Albania	1993-95:	$3,000,000
Algeria	1991-95:	$3,750,000
Angola	1994-95:	$4,091,479
Argentina	1994-95:	$1,072,661
Armenia	1993-94:	$2,000,000
Azerbaijan	1993-94:	$2,000,000
Bangladesh	1993-95:	$52,800,000
Barbados[1]	1993:	$100,000
Belize	1992-96:	$3,750,000
Benin	1994-98:	$5,500,000
Bhutan	1992-96:	$5,000,000
Bolivia	1993-97:	$6,875,000
Botswana	1995-99:	$5,200,000
Brazil	1994-2000:	$11,900,000
Burkina Faso	1994-95:	$2,800,000
Burundi	1993-97:	$7,150,000
Cambodia	1994-95:	$4,280,000
Cameroon	1995:	$597,120
Cape Verde	1995-99:	$3,750,000
Central African Republic	1993-97:	$6,000,000
Chad	1994-95:	$2,832,000
Chile	1994-96:	$2,016,000
China	1994-95:	$36,000,000
Colombia	1993-97:	$6,050,000
Comoros	1995-96:	$1,500,000
Congo	1992-96:	$5,000,000
Costa Rica	1992-96:	$3,750,000
Côte d'Ivoire	1992-96:	$7,700,000
Cuba	1992-96:	$5,000,000
Djibouti	1994-98:	$3,500,000
Dominican Republic	1992-96:	$5,000,000
Eastern Caribbean Islands[2]	1993-97:	$5,100,000
Ecuador	1994-98:	$5,000,000
Egypt	1995-2000:	$30,000,000
El Salvador	1992-96:	$5,000,000
Equatorial Guinea	1994-98:	$3,750,000
Eritrea	1994-95:	$1,500,000
Ethiopia	1994-99:	$75,000,000
Gabon	1993-95:	$2,250,000
Gambia	1992-96:	$3,750,000
Georgia	1994-95:	$2,000,000
Ghana	1995:	$1,184,551
Guatemala	1992-96:	$5,000,000
Guinea	1991-95:	$9,250,000
Guinea-Bissau	1994-97:	$3,750,000
Guyana	1995-99:	$3,750,000
Haiti	1995:	$1,541,405
Honduras	1995:	$1,032,757
India	1991-95:	$175,000,000
Indonesia	1990-95:	$62,450,000
Iran, Islamic Rep. of	1993-97:	$6,000,000
Iraq	1995-96:	$3,000,000
Jamaica	1990-94:	$3,043,000
Jordan[3]	1993-97:	$5,000,000
Kazakhstan	1993-94:	$2,000,000
Kenya	1994-98:	$22,000,000
Korea, Dem. People's Rep. of	1994-98:	$5,000,000
Korea, Rep. of	1990-93:	$1,800,000
Kyrgyzstan	1993-94:	$2,000,000
Lao People's Dem. Rep.	1992-96:	$6,600,000
Lebanon[3]	1992-96:	$5,000,000
Lesotho	1992-96:	$5,000,000
Liberia	1994-96:	$3,000,000
Madagascar	1994-95:	$4,322,000
Malawi	1992-96:	$16,500,000
Malaysia	1994-96:	$2,250,000
Maldives	1994-98:	$3,750,000
Mali	1993-97:	$20,625,000
Mauritania	1994-98:	$5,000,000
Mauritius	1995:	$750,000
Mexico	1994-95:	$1,816,250
Mongolia	1994-96:	$2,261,000
Morocco	1992-96:	$13,200,000
Mozambique	1994-98:	$42,000,000
Myanmar	1991-95:	$25,000,000
Namibia	1992-96:	$5,000,000
Nepal	1992-96:	$25,000,000
Nicaragua	1992-96:	$5,000,000
Niger	1995-99:	$12,200,000
Nigeria	1991-95:	$65,000,000
Oman	1991-95:	$3,750,000
Pacific Islands[4]	1992-96:	$7,150,000
Pakistan	1992-96:	$71,500,000
Panama	1992-96:	$3,750,000
Papua New Guinea	1993-97:	$5,260,000
Paraguay	1995-99:	$6,000,000
Peru	1992-96:	$7,450,000
Philippines	1994-98:	$22,500,000
Rwanda	1993-97:	$9,900,000
Sao Tome and Principe	1995:	$411,687
Senegal	1992-96:	$8,800,000
Seychelles[1]	1993:	$50,000
Sierra Leone	1995:	$1,522,317
Somalia	1994-95:	$5,200,000
South Africa	1994-96:	$6,000,000
Sri Lanka	1992-96:	$6,875,000
Sudan	1995:	$1,217,284
Suriname[1]	1993:	$100,000
Swaziland	1994-95:	$919,340
Syria[3]	1991-95:	$4,500,000
Tajikistan	1993-94:	$2,000,000
Tanzania	1992-96:	$38,500,000
Thailand	1994-98:	$10,750,000
Togo	1994-96:	$3,000,000
Trinidad and Tobago[1]	1993:	$50,000
Tunisia	1995-96:	$955,436
Turkey	1991-95:	$10,000,000
Turkmenistan	1993-94:	$2,000,000
Uganda	1994-95:	$5,202,101
Uruguay	1992-96:	$3,750,000
Uzbekistan	1993-94:	$2,000,000
Venezuela	1991-95:	$3,750,000
Viet Nam	1991-95:	$40,000,000
Yemen	1994-98:	$12,500,000
Zaire	1993-95:	$20,460,000
Zambia	1995-96:	$3,400,000
Zimbabwe	1995-2000:	$8,400,000

[1] Financed from interregional funding only in 1993: Barbados, Seychelles, Suriname, and Trinidad and Tobago.

[2] Includes Antigua and Barbuda, British Virgin Islands, Dominica, Grenada, Montserrat, Saint Kitts and Nevis, Saint Lucia, Saint Vincent and the Grenadines, and Turks and Caicos Islands.

[3] UNICEF is providing assistance for Palestinian women and children in the following: West Bank and Gaza – $1,450,000 (1994-95); Jordan – $800,000 (proposed for 1994-97); Lebanon – $1,400,000 (1992-95); Syria – $1,000,000 (1991-95).

[4] Includes Cook Islands, Federated States of Micronesia, Fiji, Kiribati, Marshall Islands, Niue, Palau, Samoa, Solomon Islands, Tokelau, Tonga, Tuvalu and Vanuatu.

ditures against the 1994–1995 biennium amount to US$431 million.

LIQUIDITY PROVISION

UNICEF works with countries to prepare programmes so that recommendations can be approved by the Executive Board in advance of major expenditures on these programmes. UNICEF does not hold resources to fully cover the costs of these recommendations in advance, but depends on future income from general resources. The organization does, however, maintain a liquidity provision to allow for temporary imbalances between cash received and disbursed, as well as to absorb differences between income and expenditure estimates.

UNICEF maximizes planned general resource programme expenditures based on the requirements of the liquidity provision and on the level of projected general resource contributions.

UNICEF/93-0045/Murray-Lee

Funds raised by UNICEF and its partners can help to make agricultural work less burdensome.

COST-EFFECTIVENESS

THE new Office of Social Policy and Economic Analysis (OSPEA) was charged in 1993 with helping to develop a 'cost culture' both within and outside UNICEF. OSPEA was involved in training workshops on costing and financing in EAPRO, ESARO, TACRO and WCARO, for office personnel, Representatives, senior programme coordinators, and project and programme staff. In the case of WCARO, training was extended to government counterparts, including several Directors General. Country-level training sessions were also held in Cambodia, Dominica, the Dominican Republic, Jamaica, Mauritius, Oman, Saint Lucia, Sri Lanka, the Sudan and Uganda. The main objective was to finalize the cost and financing portion of NPAs.

OSPEA was also involved in a water and environmental sanitation skills/strategy workshop in Bangladesh, and WATSAN cost-effectiveness studies in Benin and Uganda. Education reform analyses were conducted in Bhutan, Burkina Faso, Myanmar, Uganda and Viet Nam, and training was provided for the development of a costing methodology for EPI in Oman.

GREETING CARD AND RELATED OPERATIONS

GREETING card and related operations (GCO) contributed a record US$107.2 million to UNICEF general resources during fiscal year 1991/1992 and moved on several fronts to expand its earnings beyond the sale of greeting cards. It tested new products, worked with National Committees on sales strategies and was involved in private sector fund-raising for children in especially difficult circumstances.

Once again, it defied a sluggish global economy by raising its net income by 30.4 per cent (US$24.9 million) and helped to generate another US$23.1 million for special projects in need of supplementary funds.

GCO's consolidated net income of US$107.2 million included US$71.3 million in net operating income from greeting card and other product sales and US$41.3 million in net operating income from private sector fund-raising activities, less US$5.4 million for exchange rate fluctuations, the Central and Eastern European National Committees' Development Programme and prior years' adjustments.

◆ INTERNAL STUDIES: GCO completed sev-

BEST COPY AVAILABLE

UNICEF/93-0821/Toussaint

Young visitors study pictures at an exhibition that brings home to them the 'perilous path' young girls in developing countries must follow.

eral studies in 1993, including reviews of GCO-funded staff and operations in country offices, the cost-effectiveness of production facilities, and the investment benefits of the Fund-raising Development Programme.

◆ CARD AND OTHER PRODUCT SALES: The gross proceeds from sales of greeting cards and other products in fiscal year 1991/1992 increased by 13.3 per cent from US$133.3 million to US$151 million, but sales volume for the same period declined by 2 million to 150 million cards.

Various strategies were implemented in 1993 to boost sales volume in line with revenue growth. These included: expanding distribution channels in major market countries; testing and developing product concepts for specialized sales channels; and increasing market research for a better understanding of customers and their buying behaviour. GCO also worked towards streamlining its business procedures, sales and product policies, product mix and promotional materials, in an effort to communicate a consistent corporate image worldwide.

◆ GREETING CARD WORKSHOP FOR NATIONAL COMMITTEES: All National Committees met in Geneva (February) for the first global Greeting Card Workshop. The meeting was a first step towards establishing a fully integrated UNICEF product collection and increasing world recognition of its brand.

◆ PRIVATE SECTOR FUND-RAISING: GCO also strengthened its support for the private sector fund-raising efforts of UNICEF National Committees and country offices.

This support included the biannual Private Sector Fund-raising Workshop for National Committees held in Geneva in October; strategic planning and technical assistance; and fund-raising kits on Children in War, Children in former Yugoslavia, Immunization, and on country programmes in Angola, Nepal, Peru and Viet Nam.

GCO's Fund-raising Development Programme has acquired a total of 198,900 new donors for 10 National Committees and three country offices since 1991. For a total investment of US$4.8 million, the programme has generated direct returns of US$10.6 million.

◆ EXHIBITS AND DISPLAYS: Thematic exhibitions shown at the United Nations during the year included: 'No War Anymore' (*see 'Children in especially difficult circumstances'*), 'Girls and Girlhood: A Perilous Path'; and 'Youth and AIDS: Act Now!'

Thematic displays were also produced on the 'mid-decade goals', 'the urban challenge', and 'the baby-friendly hospital initiative'. Several of these exhibits were displayed at international conventions in Asia, Latin America and the United States.

INFORMATION RESOURCES

SINCE the mid-1980s, UNICEF has progressively strengthened its field office computer infrastructure to facilitate a standard computerized system for operating procedures. Projects have been initiated to connect separate personal computers into office local area networks (LANs) and develop a next generation standard computer system to better support programme management in the field. Planning is well under way for the conversion of all headquarters computer systems, providing new technologies to improve the organization's productivity and effectiveness.

UNICEF established a node on the global Internet electronic system in 1993 to expand electronic communication with external partners and improve electronic access to key UNICEF information.

HUMAN RESOURCES

UNICEF had almost 7,000 staff serving in 115 countries in 1993 — three times as many people as in the early 1980s. Eighty-three per cent were serving in the field, and an increasing number of those assignments were hazardous. During the year, 13 per cent of the organization's staff were deployed in countries affected by complex emergencies.

◆ **STAFF ON THE FRONT LINE:** Three people were killed working for UNICEF in Somalia and Uganda. One staff member has been missing since 7 July 1992. Injuries among staff in emergency situations also increased. As a result, UNICEF took special steps to increase staff safety, appointing a full-time security coordinator and initiating a range of staff security training activities in East and West Africa.

The scale and scope of UNICEF emergency operations worldwide increased substantially in 1993 with more than 25 per cent of the organization's resources devoted to assistance in 64 emergency countries, compared with 54 the previous year. Some of these operations were in countries where UNICEF had no previous presence, such as the republics of former Yugoslavia.

◆ **FIELD AND HEADQUARTERS ASSIGNMENTS:** UNICEF has a diverse workforce with staff from 117 different countries, 66 per cent of them developing countries. They are currently assigned to some 228 locations, including regional and country offices and sub-offices.

In keeping with the high priority given to the needs of Africa's children, 40 per cent of UNICEF staff are located in sub-Saharan Africa. Twenty-three per cent are working in Asia, 11 per cent in the Americas and the Caribbean, and 9 per cent in the Middle East and North Africa. The remaining 17 per cent serve in headquarters duty stations (New York, Geneva, Copenhagen, Florence and Tokyo/Sydney) or in recently created offices in CEE and the countries of the former Soviet Union.

About 2,000 UNICEF staff are in the professional category, both international and national.

UNICEF staff were appointed to newly established offices in the five Central Asian republics and to Armenia and Azerbaijan during the year, reflecting the organization's concern to respond rapidly to the needs of children in the republics of the former Soviet Union.

All of these offices are small, but they have established a base from which UNICEF might influence emerging social policy and provide much-needed direct assistance, depending on the circumstances.

◆ **FEMALE REPRESENTATION:** By the end of the year, there were 78 country offices headed by a Representative — more than twice the number a decade earlier. Twenty-four of the Representatives are women, and the representation of women in senior positions elsewhere in the organization improved also.

Thirty-seven per cent of international professional posts were filled by women in 1993, compared with 27 per cent in 1985, and in the national professional officer category, 44 per cent of posts are held by women. One third of P/L-5 posts and almost one quarter of director-level posts are now filled by women, compared with only one fifth and one tenth respectively 10 years ago.

Sixty per cent of the successful external candidates during the year were women, as were 50 per cent of appointees to emergency countries.

UNICEF expects to achieve its goal of raising women's representation to 40 per cent throughout the professional grades by 1994. The target for the year 2000 is 50 per cent.

GOVERNMENTAL AND NON-GOVERNMENTAL CONTRIBUTIONS TO UNICEF, 1993

Donor	GOVERNMENTAL CONTRIBUTIONS (in thousands of US dollars)			NON-GOVERNMENTAL CONTRIBUTIONS (in thousands of US dollars)		
	Supplementary funds	General resources	Total	Contributions	GCO	Total
Afghanistan		35.3	35.3			
Albania		0.1	0.1			
Algeria		50.0	50.0		226.9	226.9
Angola					25.6	25.6
Argentina	50.0		50.0	441.8	342.6	784.4
Australia	6,294.5	2,965.5	9,260.1*	2,852.8	1,204.1	4,056.9
Austria		1,771.3	1,771.3	1,230.5	1,434.1	2,664.6
Bahamas		0.5	0.5			
Bahrain					133.3	133.3
Bangladesh		10.1	10.1		50.4	50.4
Barbados		2.0	2.0		47.6	47.7*
Belgium	2,037.7	1,857.1	3,894.8	5,999.4	3,521.7	9,521.1
Benin		34.3	34.3		20.0	20.1*
Bhutan		6.8	6.8			
Bolivia		3.0	3.0		98.5	98.5
Botswana		8.1	8.1		10.5	10.5
Brazil				2,140.5	2,935.8	5,076.3
Brunei Darussalam	100.0		100.0			
Bulgaria		2.6	2.6		106.5	106.5
Burkina Faso					50.0	50.0
Burundi		3.8	3.8		11.0	11.0
Cameroon					36.8	36.8
Canada	23,622.8	13,593.8	37,216.6	11,860.0	3,715.7	15,575.7
Central African Republic					24.6	24.6
Chad					16.6	16.6
Chile	1,012.2	86.0	1,098.2	0.1	61.7	61.8
China		760.0	760.0	0.3	83.5	83.8
Colombia		450.3	450.3		466.6	466.6
Congo					20.2	20.2
Costa Rica		26.4	26.4		31.8	31.8
Côte d'Ivoire				0.4	87.2	87.5*
Croatia				0.5	47.1	47.6
Cuba		24.6	24.6		162.9	162.9
Cyprus					286.4	286.4
Czechoslovakia (former)		103.8	103.8		69.8	69.8
Dem. People's Rep. of Korea		37.6	37.6			
Denmark	8,457.9	24,801.9	33,259.8	182.5	2,036.2	2,218.6*
Djibouti		2.0	2.0		19.7	19.7
Dominica		1.2	1.2			
Dominican Republic		10.0	10.0		82.3	82.3
Ecuador	207.3		207.3		188.7	188.7
Egypt		20.4	20.4		89.1	89.1
El Salvador		25.4	25.4		29.9	29.9
Ethiopia		20.4	20.4		165.9	165.9
Fiji		3.2	3.2			
Finland	791.9	6,721.0	7,513.0*	809.1	2,145.8	2,954.9
France	652.6	9,637.2	10,289.7*	3,143.8	31,151.7	34,295.5
Germany	873.6	12,278.5	13,152.1	23,578.0	28,385.0	51,963.0
Ghana					36.7	36.7
Gibraltar					24.1	24.1
Greece		200.0	200.0	806.0	2,753.6	3,559.5*

Donor	Governmental contributions			Non-governmental contributions		
	Supplementary funds	General resources	Total	Contributions	GCO	Total
Greece		200.0	200.0	806.0	2,753.6	3,559.5*
Guatemala	930.2		930.2	9.5	61.9	71.4
Guinea					25.0	25.0
Guinea-Bissau				1.1	13.0	14.1
Haiti				0.2	13.8	13.9*
Holy See	2.0	2.0	4.0			
Honduras	82.0		82.0		23.1	23.1
Hong Kong		29.2	29.2	24.9	1,328.2	1,353.2*
Hungary		46.2	46.2	0.2	198.5	198.7
Iceland		153.4	153.4		29.8	29.8
India		946.0	946.0	16.7	877.3	893.9*
Indonesia	75.2	557.6	632.7*	11.1	257.7	268.9*
Iran, Islamic Republic of		50.0	50.0		156.2	156.2
Iraq	3,140.3		3,140.3		690.7	690.7
Ireland	428.2	886.3	1,314.5		330.1	330.1
Israel		37.5	37.5		23.1	23.1
Italy	9,311.5	23,800.6	33,112.1	3,167.4	22,172.1	25,339.5
Jamaica					24.2	24.2
Japan	3,063.2	25,930.0	28,993.2	20,654.1	7,351.2	28,005.3
Jordan					66.4	66.4
Kenya					85.1	85.1
Kuwait				0.8	15.1	15.9
Lao People's Dem. Rep.		5.0	5.0			
Lebanon					121.7	121.7
Lesotho		5.5	5.5			
Libya					109.8	109.8
Liechtenstein		6.7	6.7	167.8		167.8
Luxembourg	90.9	142.9	233.8	282.3	636.1	918.5*
Madagascar					16.1	16.1
Malawi		2.3	2.3			
Malaysia		84.0	84.0	1.1	125.5	126.6
Maldives		4.2	4.2			
Mali	22.2	1.0	23.2		16.5	16.5
Malta		3.9	3.9		14.6	14.6
Mauritania					21.6	21.6
Mauritius		6.8	6.8	37.4	57.4	94.7*
Mexico	96.8	200.0	296.8	129.9	664.0	794.0*
Monaco		14.8	14.8	93.8	52.0	145.8
Mongolia		1.1	1.1			
Morocco		66.9	66.9		396.4	396.4
Mozambique					44.7	44.7
Myanmar		206.1	206.1		176.6	176.6
Namibia		1.0	1.0			
Nepal		2.5	2.5			
Netherlands	11,366.6	20,060.4	31,427.0	30,601.1	7,500.4	38,101.5
New Zealand	162.2	459.5	621.6*	165.2	277.3	442.5
Nicaragua		5.1	5.1			
Niger					27.6	27.6
Nigeria	12.8	86.1	98.9	0.1	207.6	207.7
Norway	10,041.0	34,457.4	44,498.4	102.1	1,690.4	1,792.5
Oman		100.0	100.0	8.7	75.8	84.5
Pakistan		100.2	100.2	0.1	134.2	134.3
Panama		31.3	31.3		24.7	24.7
Papua New Guinea		5.0	5.0	0.4	20.5	20.9

Donor	GOVERNMENTAL CONTRIBUTIONS			NON-GOVERNMENTAL CONTRIBUTIONS		
	Supplementary funds	General resources	Total	Contributions	GCO	Total
Paraguay		2.0	2.0		55.1	55.1
Peru					264.2	264.2
Philippines		199.7	199.7	(6.6)	196.7	190.1
Poland		34.1	34.1	18.8	136.7	155.4*
Portugal		40.0	40.0	147.3	1,469.5	1,616.9*
Qatar					21.3	21.3
Republic of Korea		900.0	900.0	(95.4)	1,783.6	1,688.2
Romania		1.9	1.9		156.6	156.6
Russian Federation					241.5	241.5
Saint Lucia		2.6	2.6			
Saudi Arabia				103.6	169.8	273.4
Senegal					144.1	144.1
Sierra Leone					14.6	14.6
Singapore		10.0	10.0	39.4	126.9	166.3
Slovenia					431.0	431.0
South Africa	4.0		4.0			
Spain	(36.2)	2,168.3	2,132.1	7,658.7	9,149.5	16,808.2
Sri Lanka		19.2	19.2	2.2	36.2	38.4
Sudan					63.6	63.6
Swaziland		4.8	4.8			
Sweden	53,783.9	44,158.9	97,942.8	403.9	2,321.6	2,725.5
Switzerland	3,854.1	11,409.4	15,263.5	7,246.1	9,105.3	16,351.4
Syria		13.2	13.2		138.7	138.7
Thailand	2.0	275.8	277.8	1.2	122.1	123.3
Trinidad and Tobago				0.2	34.4	34.6
Tunisia		60.3	60.3	0.1	172.4	172.4*
Turkey		100.0	100.0		1,268.5	1,268.5
Uganda					14.0	14.0
United Arab Emirates		100.0	100.0		35.5	35.5**
United Kingdom	2,221.2	14,179.1	16,400.3	9,792.3	2,164.2	11,956.4*
United Republic of Tanzania		6.6	6.6		79.8	79.8
United States	22,103.8	100,000.0	122,103.8	25,758.4	5,922.5	31,680.9
Uruguay		10.0	10.0		193.8	193.8
Venezuela		114.7	114.7		62.7	62.7
Viet Nam		10.5	10.5			
Yemen		16.7	16.7	0.5	48.9	49.4
Yugoslavia (former)				111.0		111.0
Zaire					151.5	151.5
Zambia		10.8	10.8		23.6	23.6
Zimbabwe				0.8	42.7	43.5
Contributions under US$10,000				7.2	94.5	101.6*
Contributions from UN staff				108.5		108.5
Subtotal	164,858.5	357,901.0	522,759.5	159,819.7	165,049.1	324,868.8
Less: GCO fiscal period adjustment ***					(40,952.0)	(40,952.0)
Less: Cost of producing cards, sale brochures, freight and related costs					(29,033.9)	(29,033.9)
TOTAL *(in thousands of US dollars)*				159,819.7	95,063.2	254,882.9

* Discrepancies are due to rounding figures.

** Abu Dhabi.

*** This adjustment aligns the GCO fiscal period which ends 30 April, to the UNICEF fiscal period which ends 31 December.

ANNEX

1993 Executive Board Decisions

THE Executive Board met in regular session from 26 April to 7 May 1993, reaching 23 decisions on programme priorities and resource commitments. Two other decisions — on the Maurice Pate Award and future work and procedures of the Board — were reached during an earlier organizational session.

At its regular session, the Executive Board:

» Requested the Executive Director to include in future country programmes plans to *strengthen national capacities*; to support countries in developing indicators for monitoring institutional development plans; and to include in his annual reports information by region on the experience gained (decision 1993/3).

» Reaffirmed the commitment of UNICEF to *Africa as the region of highest priority* at present and its commitment to assist countries in Africa to fulfil the human development goals of the 1990s, as expressed at the World Summit for Children and in the Consensus of Dakar (decision 1993/4).

» Requested the Executive Director to ensure that *country programme evaluations* become an integral part of the country programming exercise, in order to provide better assessments of the performance of UNICEF; to include in his report on evaluation presented to the Board every second year a summary of the results of UNICEF programme and project evaluations; to refine the UNICEF evaluation information system as part of the process of reshaping the overall information system for programme planning and management, currently under development; and to continue to collaborate with the Joint Consultative Group on Policy to work towards the adoption by the operational agencies of the United Nations system of similar evaluation summary reporting systems and formats (decision 1993/5).

» Invited Governments, UNICEF and other partners at the field level to present their views on the *issues covered in the evaluation* of UNICEF initiated by the Governments of Australia, Canada, Denmark and Switzerland, to ascertain how these can benefit their work. The Executive Director was requested to analyse the responses received and to report back to the Board at its 1994 session on the experience gained and suggestions for further use to which elements of the evaluation might be put. The Board invited interested parties to establish in New York, with the assistance of the secretariat, an open-ended working group to identify issues in the evaluation that merit further consideration and to report to the 1994 Board with proposals for dealing with those issues (decision 1993/6).

» Called upon UNICEF to continue to undertake its primary responsibilities *to assist children and women in emergencies* under the overall coordination of the United Nations Department of Humanitarian Affairs and in close cooperation with the Inter-Agency Standing Committee on emergencies, other international agencies and NGOs. The Board also recommended a level of US$14 million for the Emergency Programme Fund (EPF) for the biennium 1994–1995 and decided to review the EPF level for 1994–1995, after the deliberations on coordinating United Nations humanitarian assistance at the 1993 substantive session of the Economic and Social Council and/or the forty-eighth session of the General Assembly (decision 1993/7).

» Endorsed a two-pronged approach to the *problems of the urban poor*, consisting of an urban focus in all sectoral programmes and a revitalized urban basic services strategy, including the provision of social services and the promotion of employment (decision 1993/8).

» Approved a total of US$599,148,598 from general resources and US$371,167,000 for supplementary funding for *programme cooperation* in Africa, the Americas and Caribbean, Asia, Central and Eastern Europe and the Middle East and North Africa and to cover overexpenditure (decision 1993/9);

» Encouraged donor countries and organizations to provide resources for *supplementary funding* components of country programmes, and for the *Special Adjustment Facility for Latin America and the Caribbean*, to support Latin American and Caribbean countries (decision 1993/10).

» Urged the Executive Director to undertake, as part of *UNICEF support for maternal and child health and family planning*, the promotion of sexual and reproductive health, with particular attention to the needs of young people, including education regarding responsible sexual behaviour. The Board also invited the governing bodies of WHO, UNFPA and other concerned United Nations agencies to collaborate fully with UNICEF CSD as part of their support for family planning and related activities in

developing countries (decision 1993/11).

» Encouraged countries to examine their *national programmes of action* (NPAS), so as to identify feasible targets for achievement by mid-decade, to develop annual action plans to incorporate NPA activities into the regular national budgetary process and to prepare plans to make national programmes operational at provincial, municipal and district levels (decision 1993/12);

» Endorsed 1995 as the target date for every State to have become a party to the *Convention on the Rights of the Child*; called upon all States which have not ratified it to examine the steps required for them to do so; and called upon all States which have ratified the Convention to take steps to implement it (decision 1993/13).

» Requested the Executive Director, with regard to *children, environment and development*, to transmit to the Commission on Sustainable Development the goals and strategies for children in the 1990s for its deliberations on the multi-year thematic programme of work at its first substantive session and in the monitoring of progress on implementation of Agenda 21 (decision 1993/14).

» Called for full compliance by all manufacturers and distributors of breast-milk substitutes with government actions *prohibiting the distribution of free or low-cost supplies of infant formula by June 1993*. The Board also called on Governments in industrialized countries *to end the distribution of free and low-cost supplies of infant formula in industrialized countries by June 1994*, to coincide with the date the Directive of the Commission of the European Community on infant formulae and follow-on formulae (91/321/EEC) comes into force (decision 1993/15).

» Endorsed the recommendations of the UNICEF/WHO *Joint Committee on Health Policy* (JCHP), made at its meeting in Geneva on 1–3 February 1993 concerning follow-up to the World Summit for Children; maternal health and newborn care; vaccine needs; control of diarrhoeal diseases, including cholera, and ARI; implementation of BFHI; healthy lifestyles for youth; health education; and malaria control (decision 1993/16).

» Approved the *medium-term plan* (E/ICEF/1993/3) as an indicative framework of projections for 1993–1996, including the preparation of up to US$330 million in programme expenditures from general resources to be submitted to the 1994 Executive Board. The amount is subject to the availability of resources and to estimates of income and expenditure made in the plan continuing to be valid (decision 1993/17).

» Authorized the Executive Director to close the two special accounts for the *World Summit for Children* by transferring the balance, a total of US$122,533.65, to general resources (decision 1993/18); approved the reserve for procurement services at US$2 million and took note of a number of financial reports (decision 1993/19).

» Approved *total expenditures* of US$431,363,380 for the administrative and programme support budget for the biennium 1994–1995. The Board also resolved that the Executive Director be requested to exercise maximum restraint in the implementation of the budget while ensuring the integrity and effectiveness of programme delivery (decision 1993/20).

» Approved from *global funds* a consolidated total of US$140,589,000 for general resources and US$164,030,000 for supplementary funds for the period 1994–1995 (decision 1993/21).

» Requested the Executive Director to obtain from the United Nations Development Corporation and New York City and from the City of New Rochelle by 30 June 1993, at the latest, firm offers for *options for headquarters office accommodation* in New York City and New Rochelle. The Executive Director was requested to analyse each offer with the input of an independent real estate consultant and to submit the final offers and his analysis and possible recommendations to the Advisory Committee on Administrative and Budgetary Questions by 31 July 1993. The Board decided to convene a two-day special session no later than 15 September 1993 to take a decision to enable the Executive Director to sign an agreement at the earliest possible date (decision 1993/22).

» Decided that an *independent administrative and management review* should be carried out by external consultants, in close cooperation with the secretariat, to be finalized by the end of 1994 and the consultants' report presented to the Executive Board. The Board requested the Executive Director to take into account all its comments in the revision of the outline of the management study and requested that the revised outline, including the draft terms of reference and a budget, be presented to the Board at its 1994 winter organizational session for approval before the study is executed (decision 1993/23).

» Approved for fiscal year 1 May 1993 to 30 April 1994 total *budgeted expenditures for* GCO of US$69.2 million (decision 1993/24) and took note of several GCO financial reports (decision 1993/25).

GLOSSARY

AIDS	acquired immunodeficiency syndrome
ARI	acute respiratory infections
BFHI	baby-friendly hospital initiative
CDD	control of diarrhoeal diseases
CEE	Central and Eastern Europe
CSD	child survival and development
DHA	Department of Humanitarian Affairs (United Nations)
EAPRO	East Asia and Pacific Regional Office (UNICEF)
EEC	European Economic Community
EPF	Emergency Programme Fund
EPI	expanded programme on immunization
ESARO	Eastern and Southern Africa Regional Office (UNICEF)
FAO	Food and Agriculture Organization of the United Nations
GCI	Greeting card and related operations (UNICEF)
GCSF	Global Communication Support Fund
HIV	human immunodeficiency virus
IASC	Inter-Agency Standing Committee (United Nations)
IDB	Inter-American Development Bank
IDD	iodine deficiency disorders
IFAD	International Fund for Agricultural Development
ILO	International Labour Organisation
IYF	International Year of the Family
JCHP	Joint Committee on Health Policy (UNICEF/WHO)
JUNIC	Joint United Nations Information Committee
MCH	maternal and child health
MENA	Middle East and North Africa (UNICEF)
NGO	non-governmental organization
NPA	national programme of action
OAU	Organization of African Unity
ODA	official development assistance
OECD	Organisation for Economic Co-operation and Development
OPEC	Organization of Petroleum Exporting Countries
ORS	oral rehydration salts
ORT	oral rehydration therapy
PAHO	Pan American Health Organization
PHC	primary health care
SAARC	South Asian Association for Regional Cooperation
TACRO	The Americas and Caribbean Regional Office (UNICEF)
TBA	traditional birth attendant
UBS	urban basic services
UCI	universal child immunization
UNCTAD	United Nations Conference on Trade and Development
USMR	under-five mortality rate
UNDP	United Nations Development Programme
UNEP	United Nations Environment Programme
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNFPA	United Nations Population Fund
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations Children's Fund
UNRWA	United Nations Relief and Works Agency for Palestine Refugees in the Near East
USAID	United States Agency for International Development
WATSAN	water and sanitation
WCARO	West and Central Africa Regional Office (UNICEF)
WFP	World Food Programme
WHO	World Health Organization

BEST COPY AVAILABLE

Further information about UNICEF and its work may be obtained from

UNICEF Headquarters
UNICEF House
3 UN Plaza
New York, NY 10017, USA

UNICEF Geneva Office
Palais des Nations
CH – 1211 Geneva 10, Switzerland

UNICEF Eastern and Southern Africa
Regional Office
P.O. Box 44145
Nairobi, Kenya

UNICEF West and Central Africa
Regional Office
B.P. 443
Abidjan 04, Côte d'Ivoire

UNICEF Americas and Caribbean
Regional Office
Apartado 7555
Santa Fe de Bógotá, Colombia

UNICEF East Asia and the Pacific
Regional Office
P.O. Box 2-154
Bangkok 10200, Thailand

UNICEF Middle East and North Africa
Regional Office
P.O. Box 811721
11181 Amman, Jordan

UNICEF South Asia Regional Office
P.O. Box 5815, Lekhnath Marg
Kathmandu, Nepal

UNICEF Office for Australia and New Zealand
P.O. Box Q143
Sydney, NSW 2000, Australia

UNICEF Office for Japan
UN Headquarters Building, 8th floor
53-70, Jingumae 5-chome
Shibuya-ku
Tokyo 150, Japan

Information may also be obtained from the following Committees for UNICEF

Australia: Australian Committee for UNICEF Ltd.
55 Clarence Street, Suite 903
Sydney, NSW 2000

Austria: Österreichisches Komitee für UNICEF
Vienna International Centre (UNO-City)
22, Wagramer Strasse 5
A – 1400 Vienna

Belgium: Comité belge pour l'UNICEF
Avenue des Arts 20
B – 1040 Brussels

Bulgaria: Bulgarian National Committee for UNICEF
18/B Pentcho Slaveikov Blvd.
BG – 1606 Sofia

Canada: Canadian UNICEF Committee/ Comité UNICEF Canada
443, Mount Pleasant Road
CDN – Toronto, Ontario M4S 2L8

Denmark: Dansk UNICEF Komite
Billedvej 8, Frihavnen
DK – 2100 Copenhagen Ø

Finland: Suomen UNICEF – yhdistys r.y.
Perttulantie 6
SF – 00210 Helsinki

France: Comité français pour l'UNICEF
3, rue Duguay-Trouin
F – 75282 Paris Cedex 06

Germany: Deutsches Komitee für UNICEF
Höninger Weg 104
D – 50969 Cologne

Greece: Hellenic National Committee for UNICEF
Xenias Street, 1
GR – 115 27 Athens

Hong Kong: Hong Kong Committee for UNICEF
60, Blue Pool Road 3/F
Happy Valley, Hong Kong

Hungary: UNICEF Magyar Nemzeti Bizottsága
Varsanyi Iren U. 26-34, II. LH VI. 1
H – 1027 Budapest

Ireland: Irish National Committee for UNICEF
4 St. Andrew Street
IRL – Dublin 2

Israel: Israel National Committee for UNICEF
P.O. Box 80/09
IL – 93105 Jerusalem

Italy: Comitato Italiano per l'UNICEF
Via Ippolito Nievo, 61
I – 00153 Rome

Japan: Japan Committee for UNICEF
Daiichi Daikyo-cho Bldg.
31-10, Daikyo-cho
Shinjuku-ku, Tokyo-160

Latvia: Latvian National Commission for UNICEF
Str. Brivibas, 75
LV – 1047 Rīga

Lithuania: Lithuanian National Committee for UNICEF
Roziu Avenue 4a
2600 Vilnius

Luxembourg: Comité luxembourgeois pour l'UNICEF
99, Route d'Arlon
L – 1140 Luxembourg

Netherlands: Stichting Nederlands Comité UNICEF
St. Barbaraweg 4
Postbus 30603
NL – 2500-GP The Hague

New Zealand: New Zealand Committee for UNICEF
P.O. Box 347
NZ – Wellington

Norway: UNICEF-Komiteen I Norge
P.O. Box 6877
St. Olavs Pl.
N – 0130 Oslo 1

Poland: Polski Komitet UNICEF
P.O. Box No. 19
PL – 00-551 Warsaw

Portugal: Comité Português para a UNICEF
Av. Ant Augusto Aguiar, 56-3 Esq.
P – 1000 Lisbon

Republic of Korea: Korean Committee for UNICEF
17-1, Changsung-Dong
Chongro-ku
110-034 Seoul

Romania: Comitetul National Român UNICEF
Strada Stirbei Voda nr. 37
Sectorul 1
R – 70.732 Bucharest

San Marino: Commissione Nazionale Sammarinese per l'UNICEF
c/o Segreteria di Stato per gli Affari Esteri
Palazzo Begni
I – 47031 San Marino

Slovakia: Slovak Committee for UNICEF
Panská (Bibiana)
81499 Bratislava

Spain: Comité Español del UNICEF
Apartado 12021
E – 28080 Madrid

Sweden: Svenska UNICEF-Kommittén
Box 222 23
(Hantverkargatan 5)
S – 104 22 Stockholm

Switzerland: Schweizerisches Komitee für UNICEF
Postfach
CH – 8021 Zürich

Turkey: UNICEF Türkiye Milli Komitesi
Abdullah Cevdet Sokak No. 20/10
TR – 00680 Çankaya – Ankara

United Kingdom: UK Committee for UNICEF
55 Lincoln's Inn Fields
GB – London WC2A 3NB

United States of America: US Committee for UNICEF
333 East 38th Street
USA – New York, NY 10016

BEST COPY AVAILABLE

Printed on recycled paper